

Philippines Humanitarian Country Team

## 2019 Marawi Humanitarian Response, Early Recovery and Resources Overview for the Displacement Caused by Conflict in Marawi City (revised September 2019)



Key Figures

**66,000\***  
displaced people

**230,000**  
returned people

**125,000**  
affected children

**\$36.1M**  
required (US\$)

**INTRODUCTION**

In May 2017, fighting between security forces and armed insurgents in Marawi City in Lanao del Sur displaced at least 360,000 people. The Government of the Philippines led the provision of relief assistance with support coming from local, national and international humanitarian partners. Two years on, the Humanitarian Country Team (HCT) and its partners guided by the Government's Task Force Bangon Marawi (TFBM) continue to provide a coordinated response to the priority humanitarian, protection, and early recovery needs of vulnerable people severely affected by the conflict. While most people have now returned home, upwards of 66,000 people remain in temporary settlements and with host families around Marawi City up until to 2022, according to Government estimates.

Maintaining the necessary momentum of humanitarian assistance to people who remain severely affected by the conflict, and their host communities is the primary purpose of the strategy outlined in this updated document, as well as looking to complement the Government-led recovery, rehabilitation and peacebuilding programme. For the remaining part of 2019 and into 2020, the Humanitarian Country Team will continue to prioritize assistance to those who remain displaced in temporary shelters and with host communities and to support sustainable recovery under the overall guidance and leadership of Government at the national, provincial and city levels.

**SITUATION OVERVIEW**

The Bangsamoro Autonomous Region in Muslim Mindanao (BARMM), has the highest number of people displaced by armed conflict, crime and violence in the Philippines. The majority of displaced people are from the Marawi conflict. Two years after the Marawi siege, more than 66,000 displaced people are living in evacuation centers, host locations and transitory sites waiting to return home and to rebuild their lives. However, their homes, businesses and livelihoods in the most affected area of the city were destroyed by the conflict and remnant munitions and other unexploded ordnance remain a threat. The Government plans to implement a phased return of families to these areas subject to the issuance of permits to return by the city authorities. The Government estimates that it may take up to 3 to 5 years to reconstruct this part of the city, comprising of 24 Barangays. Displaced women, children, elderly and other vulnerable people will continue to require sustained humanitarian assistance including protection in their current locations until they can return home or achieve a secure and sustainable future. Prior to the end of 2019, the Government plans to relocate remaining occupants of recognized evacuation centres to transitory sites but the sites are confronted with limited resources and capacity to support the number of people expected. While rebuilding road and bridge infrastructure, rehabilitate institutions and economic infrastructure gains momentum, the provision of food, shelter, health, water and sanitation, education and protection services to meet the immediate needs of the displaced remains limited.

The Department of Social Welfare and Development estimates that 230,250 people have by now returned to the 72 Barangays in Marawi City that were partially damaged by the conflict. The community looks to the restoration of their businesses and livelihoods to meet their basic needs, including education and health requirements for their children. Rehabilitation of schools, water systems, health infrastructure and income-generating activities remain a challenge.

PHILIPPINES: Marawi City



The most vulnerable segment of the community –children under five, women, girls and boys– require to be targeted with programmes and projects to assist them in recovery. Employment of youth in the productive sector, including agriculture, fisheries, and income-generating business, as well as peacebuilding and counter-terrorism is essential.

As of the end of June, 46,179 families had been profiled under the TFBM's Kathanor programme. Of these, 17,791 families are reported to be from from the Most Affected Areas (MAA) and 28,388 families are outside of MAA. The profiling exercise, supported by the World Bank and the World Food Programme, was extended in August to include the residence and business renters in the MAA. The profiling was scheduled for completion by the end of September.

\*Note: Figure based on OCHA consolidated data drawn from NHA, TFBM and DSWD Region 10

## Evacuation Centers and Transitory Sites

The Humanitarian Country Team works closely with the Government of the Philippines at the national and Mindanao level, particularly the Bangsamoro Autonomous Region in Muslim Mindanao (BARMM) to support the priority humanitarian needs of people displaced and affected by the Marawi conflict. It is also coordinating with Regional, Provincial and Local Government agencies to identify opportunities to assist in early recovery efforts.

In June 2019, members of the Mindanao Humanitarian Team (MHT) in Iligan conducted a multi-sectoral assessment of evacuation centers and transitory sites in Marawi City, Saguiran and Matungao in Lanao provinces.

A summary of key needs of IDPs living in evacuation centers and transitory sites by sector:

- Food assistance received by some IDPs had been sporadic though provision of a transitory family support package composed of Peso 73,000 (USD 1,400) in financial assistance and two food packs was welcomed.
- Livelihood support and other cash grants have eased some financial burdens, but these cannot sustain the long-term food needs of people.
- There has been limited access to health services due to transportation expenses needed to reach primary health care facilities.
- Around 60% of assessed sites needed repair for its potable water systems and 20% of septic tanks needed desludging and repair.
- Tents in evacuation centres are made of temporary materials, and some of these are dilapidated and leaking during heavy rains. More than 200 tents are recommended for urgent replacement.
- Parents in more than half of the assessed sites expressed challenges in sending their children to school.
- Safety and security issues have been reported in most sites and in the transitional sites, 69% have no dedicated spaces for women. Lack of civil documentation such as birth certificates and valid identification cards remain a concern for people, as these are necessary to access basic services.

- Regular and meaningful consultation with displaced communities and provision of information remains an important component of the return and recovery process.

Currently IDPs live in five Evacuation Centers and fifteen transitory sites. However, TFBM plans to close all officially recognized Evacuation centers before the end of the year and transfer the remaining IDPs to the transitory sites in Bonganga and Sogonsongan Transitory Sites. A total 4,500 temporary housing units are envisaged to be completed by the end of December 2019 to accommodate all IDPs from the ECs. This development will further affect IDPs living in those sites and their needs may change once the proposed changes are implemented.

## IDPs in Host Locations

Since the beginning of the Marawi conflict, more than 80 per cent of the total displaced families have lived with host families in various locations, including the city of Iligan, which is an hour drive from Marawi City. As of February 2019, the Department of Social Welfare and Development (DSWD) estimated home-based IDPs at 52,900 people. In Iligan, there are at least 1,587 displaced families, or 33 per cent of the 4,753 families that are staying with host communities, based on the UNHCR-led Joint Protection monitoring assessment for the home-based families conducted in April 2019. In general, the IDPs feel safe and secure in the city however some IDPs still experience psychological distress from the displacement and are afraid to return to Marawi. They appreciate the relative peace and comfort they experience in the city and majority of them have bought or built houses in the host locations while others continue to rent apartments and rooms. Having relatives in Iligan made it more attractive for IDPs to settle in these host communities.

Families living near schools, barangay health units and government offices receive the same level of service and care provided to host communities. But there was also the perception that less assistance is provided to them as compared to those living in evacuation centers

and transitory sites. While some families built their houses, others are living in disaster-prone areas. Further, some families are staying in houses made of light materials and at risk of fire hazard. Most of them found livelihood, employment, or are engaged in business and transportation services. Intent to return varies among IDPs; some of them want to resettle in Iligan while others are still waiting to return to the MAA. Access to information is lacking regarding government plans on return and rehabilitation in the MAA where most of them originally came from. IDPs are in different barangays in the city, thus tracking and monitoring remain a challenge, which in turn may result in the exclusion or duplication of assistance.

The Task Force Bangon Marawi (TFBM) IDP profiling is expected to provide updated population of IDPs in host communities since they are spread in various cities and municipalities, with the majority estimated to be in Lanao provinces. Tracking them is important to ensure that needs and current status are gathered so that proper interventions are provided until they receive durable solutions.

In July, DSWD under the Bangon Marawi Comprehensive Rehabilitation and Recovery Program (BMCRRP) distributed cash grant of P73,000 (US\$ 1,400) comprising of P20,000 (\$ 385) for Livelihood Settlement Grants (LSG) and P53,000 (\$ 1,019) for the Transitory Family Support Package (TFSP) to 15,615 families from the 24 Most Affected Areas (MAAs). These families may come from evacuation centres, transitory sites or those living with host communities. The LSG aims to support the recovery and rehabilitation of livelihoods of the displaced families while the TFSP is earmarked for basic expenditures of the families such as medical aid, support to livelihood and special needs of vulnerable family members.

Based on UNHCR monitoring of home-based IDPs in Lanao del Sur, access to information with regards to government plans and support is lacking. Most of the home-based IDPs prefer to stay in current location due to livelihood opportunities rather than be transferred to transitory sites in Marawi. They expressed a need for livelihood opportunities in the transitory sites should they be transferred

otherwise they would rather stay in their current location as most have found alternative jobs and livelihoods.

In August, OCHA visited Baloj, Lanao del Norte, and talked to 11 home-based IDPs living in tents. They used to live with their relatives but are now occupying tents vacated by IDPs who were transferred to Marawi. Most of the people on the site prefer to stay in their current location due to livelihood opportunities, including access to market, schools, health units, water and electricity. Majority of them are from MAA and have nowhere else to go to as return is not yet possible. They do not have relational problems with host communities especially with the barangay chairman who is very supportive of their welfare. In Saguieran municipality, the Municipal Social Service Office raised that IDPs staying with relatives still need livelihood and food assistance.

The local government unit of Saguieran estimates there are around 900 families or 4,500 people living as home-based IDPs. The LGU communicated to Marawi authorities the need to validate and assess remaining families who are living with relatives, so that they can be traced and proper intervention can be extended.

Catholic Relief Services (CRS) has reached out to those staying with host families and communities through their interventions in livelihood and shelter. As of August 2019, there are 4,049 home-based IDPs from Baloj, Iligan, Marantao, Marawi, Pantar and Saguieran who received livelihood cash grants and 73 families that received shelter assistance through provision of temporary shelter units in Pantaon and Rorogagus sites in Marawi and rental subsidy to the 16 families for one year that started in April. Meanwhile Duyog Marawi extends shelter, WASH and livelihood interventions to the underserved home-based IDPs in Marawi and Balo-i. Local NGO, Kalimudan Foundation Incorporated, distributed NFIs in early August.

Plan International under the Marawi Recovery Project is implementing livelihood grants in partnership with two local NGOs- MARADECA and ECOWEB. MARADECA is covering ten municipalities in Lanao del Sur by organizing home-based IDPs and host communities into a Community Solidarity Group where the groups are trained and taught writing proposals, which are then submitted to the Plan for approval and funding support. ECOWEB is assigned in other ten municipalities

of Lanao del Sur and Lanao del Norte targeting 4,000 home-based IDPs and host communities. The project aims to improve economic condition and strengthen social cohesion with components of livelihood provision, community infrastructure and social cohesion activity grants.



Credit: OCHA

## HUMANITARIAN RESPONSE OVERVIEW

In 2019, more than a hundred organizations have remained operational in Marawi to support the outstanding humanitarian and early recovery needs of displaced populations. Even with around \$ 28 million contributed and available for 2019, urgent needs remain in various sectors like WASH, Food Security and Livelihood, Shelter, CCCM, Health and Nutrition and Protection. These gaps need to be addressed even as rehabilitation efforts gain momentum in the city's Most Affected Barangays. The members of the Mindanao Humanitarian Team (MHT) remain committed in supporting Government-led sectoral responses, in conjunction with peacebuilding and development actors.

As of August 2019, there are more than one thousand ongoing and planned activities in the Marawi response carried out by 143 organizations: 12 UN agencies, 27 international and 54 national Non-Governmental Organizations, 24 Civil Society Organizations, 9 academe and religious groups, 10 Private Organizations and two Red Cross agencies. Since the beginning of the conflict, more than ten thousand activities have been completed.

## CCCM AND SHELTER



After more than two years in displacement sites, most of the tents hosting the IDPs are now dilapidated and need replacement. Around 350 IDP families who continue to live in tents are exposed to extreme temperatures, hot in daytime and cold at night, exposing them to health risks, particularly the vulnerable groups.

For IDPs who have already transferred to transitory sites, they have identified IDP leaders and Barangay captains to take the lead in addressing site issues raised by site residents. Nonetheless, there is an evident need to further capacitate the local and site leaders on the principles of camp management. In Sagonsongan, the National Housing Authority (NHA) assigned a site manager to receive complaints from residents.

Majority of the displaced are in host locations and they need shelter

assistance too. With limited support in host locations, some IDPs transferred to vacated ECs or in existing IDP sites citing social services access and livelihood opportunities in these sites.

In 2019, the Catholic Relief Services (CRS) provided a total of 262 shelter units to IDPs who are renters and sharers from Marawi City and staying in host communities either by providing a temporary housing unit or a rental subsidy. Aside from this, CRS is planning to provide additional 400 temporary shelter units while IOM is coordinating with TFBM and Marawi LGU for the proposed temporary shelter support.

Meanwhile, humanitarian agencies continue to advocate to TFBM the inclusion of all IDPs whether staying in recognized or unrecognized ECs as a beneficiary of temporary shelter units.

## EARLY RECOVERY AND LIVELIHOODS



The sector plans to continue its support for micro, small and medium enterprise for IDPs, creating alternative economic opportunities that will give them a stake in driving the local economy. The family livelihood restoration through financial inclusion has helped catalyze and diversify vulnerable livelihoods of at risk IDPs and helped restore markets in affected areas.

The Department of Social Welfare and Development (DSWD) continues to rollout the Sustainable Livelihood Grant of Php 20,000 (\$384) and Transitory Family Support Package (TFSP) of Php 53,000 (\$1019 value) to target beneficiaries among the homeowners and sharers from the most affected areas (MAA). More than 15,000 families have already received the livelihood support package. DSWD also plans to provide the same package amounting to Php 20,000 to the homeowners of least affected areas. They will monitor the utilization of the financial support in the coming months. The Department of Trade and Industry (DTI) also provided various starter kits to more than 10,000 families, wherein 6,000 out of the planned 15,000 target families are from MAA. TFBM continues to lead the monthly Kawayagan livelihood meeting in Marawi, where most of the

agencies from the government and humanitarian community provide updates on their assistance to the displaced families.

Agencies have continued to support livelihood interventions for IDPs in various locations. CFSI will increase by second half of 2019 its target households by 2,500 on top of its current target of 4,000 households for livelihood interventions until 2021. CRS concluded cash grants for 4,000 households and is gearing up for the project's next phase. Plan International met with agencies providing livelihood projects to map areas of operations and avoid potential overlaps.

The sector plans to scale up support for the Marawi IDPs, aiming to reach 15,000 people or 25% of the remaining 66,000 still displaced. These interventions will ensure IDPs access to assistance and ready access to appropriate financial resources to start, improve or recover their businesses and livelihood activities and build the foundations for a long-term development.

## EDUCATION



Over 100,000 school-aged children are either not back to school or are at risk of dropping out of school because of school distance from their locations and unaffordable cost of schooling. The education sector through the leadership of the Ministry of Education – BARMM was able to monitor over 21,000 learners enrolled in various public elementary and secondary schools in Marawi City, Lanao del Sur, and Lanao del Norte.

In 2019, the Education Sector of the Marawi response and recovery coordination mechanism convened to learn from various assessment findings and reflect on how programmes will be designed for normalisation and strategically aligned within the broader political environment of the Bangsamoro transition. The Marawi-LEARN (Lanao Education Actions from Recovery to Normalisation) will replace the BTS-SIS (Back to School-Stay in School) as the officially endorsed common strategy for all education partners to do interventions for all learners affected by conflict and multiple deprivations in Marawi City and Lanao areas. The sector will revisit

## HUMANITARIAN RESPONSE OVERVIEW

this Marawi-LEARN Strategy, with UNICEF working with the education ministry of BARMM. In 2019 up to 2020, an ECHO-funded consortium Education project, led by Save the Children aims to improve access to safe, quality and culturally appropriate learning opportunities, including Education in Emergency (EiE), protection needs and advocacy for school protection for Marawi IDPs. The project also plans to repair or install Temporary Learning Spaces, conduct capacity development for teachers, distribute back to school kits and WASH in schools.

## FOOD SECURITY AND AGRICULTURE



In 2019 food assistance has been irregular and only during Ramadhan in May IDPs received food packs from the Government and private individuals. The cluster has stopped monitoring food gap since February citing non-distribution of food assistance. The Food and Agriculture Organization (FAO) is continuing to help more than 10,000 farmers and fisherfolks to stabilize the food security situation and restore livelihood through the provision of planting materials, poultry and small ruminants, fertilizers and support to fishing livelihood in the four municipalities of Saguiaran, Ditsaan Ramain, Piagapo and Marantao. The profiling of 2,500 displaced families was targeted for technical assistance on improving the value chain of high value commercial crops and commodities, together with the provision of inputs, trainings, and various market linking activities.

The World Food Program (WFP) implemented a cash-based intervention of Php 6,000 (\$115) to 10,000 IDP families from 72 barangays return areas, evacuation centres and transitory sites in Marawi City. It reached 2,750 families, with 2,400 receiving first tranche and 350 families on its second tranche. The cash-based assistance is aimed at addressing food security of families in return areas, evacuation centres and transitional shelters, giving them opportunity to decide on diversification and nutritional food value that is prepared for the family. World Vision has received 2,000 metric tons of rice from Taiwan which will be distributed to an estimated 66,000 displaced families in Marawi City. UN Habitat plans to

implement agriculture-based livelihood and business trainings. In July, Care Philippines completed a cash grant in to 605 families and Action Against Hunger (AAH) is considering food security and livelihood project in Matungao Transitory Site, Lanao del Norte.

## HEALTH INCLUDING RH AND MHPSS



The sector to address the recurrent gaps in Health, including Mental Health and Psychosocial Services (MHPSS) and Sexual Reproductive Health (SRH), strengthening capacities of existing health facilities and staff to deliver primary health care services and continuing intervention to prevent outbreaks, mortalities and morbidities due to communicable and non-communicable diseases in various displacement sites.

In June, the Department of Health (DOH) Region 10 opened an Operations Centre at Amai Pakpak Medical Center in Marawi City to provide health services to IDPs in various locations in Marawi and other municipalities in Lanao del Sur and Lanao del Norte. As of 31 July, they have conducted medical consultations to 1,695 people and made 57 referral cases. Top morbidities for ages 15 years and below are Upper Respiratory Tract Infection (URTI), Systemic Viral Infection and Acute Gastroenteritis; while for IDPs above 15 years old, top three morbidities include hypertension, URTI and Type II Diabetes Mellitus. In seven IDP sites, the OpCen conducted Mental Health and Psychosocial Services through the provision of basic services, psychoeducation, hygiene promotion, nutrition, awareness on communicable and Non-Communicable Diseases, dengue awareness, among others. DOH 10 also extended services in antenatal and postpartum and newborn care, Expanded Program on Immunization (EPI), nutritional supplementation and family planning counselling. They reached 68 pregnant women, identified 11 in high risks pregnancy and 96 lactating mothers.

UNICEF with Ministry of Health (MOH) - BARMM plans to conduct desludging in IDPs sites and will distribute 800 health kits in evacuation centres. Medecins Sans Frontieres (MSF) continues

to provide health interventions for the displaced communities. In coordination with Marawi City Health Office, MSF conducts weekly medical consultations, including provision of medicines in Sagonsongan Transitory Site. The agency provides primary health care at the CHO through medical consultations, free medicines, referrals to Amai Pakpak Medical Center (APMC) and covering costs for laboratory tests in APMC. Mental Health cases are referred to LIFT organization in Iligan providing mental health services to IDPs. MSF is rehabilitating two barangay health stations in Marawi. With additional medical doctor, MSF plans to provide primary health care services to people in Boganga Transitory Site.

Care Philippines is providing support to treat Non-Communicable Diseases in seven sites in Marawi through prevention and management of hypertension, diabetes and obesity for IDPs above 30 years old, targeting 9,422 people. The project will be expanded to another 15 municipalities in Lanao del Sur. In July, Care Philippines desludged full septic tanks in Balo-I, Saguiaran and in Brgy Datu Saber, Marawi City and has prepositioned 380 boxes of water purifier tabs with the Integrated Provincial Health Office (IPHO) – Lanao del Sur.

## NUTRITION



Even prior to the conflict, Lanao del Sur had already the highest prevalence of malnutrition in the country, with five out of ten children categorized as malnourished. Food inadequacy and insufficient health care services are the direct causes of malnutrition. Without continued support, malnutrition in Lanao del Sur is expected to worsen as displacement continues.

As of July, the DOH Region -10 through the Operations Center in Marawi conducted nutrition services for IDPs in Marawi and in Lanao del Norte, including Mid Upper Arm Circumference (MUAC) screening to a total of 459 children aged 6 months to 6 years in nine sites and 157 pregnant and lactating women (PLW); all screened IDPs were in normal condition. Nutritional supplements and deworming were given to various age groups. From May up to July, DOH 10 conducted supplemental feeding covering 857 children and adults in five sites.

## HUMANITARIAN RESPONSE OVERVIEW

WFP's Nutrition in Emergencies program in 14 municipalities of Lanao del Sur and Marawi City is ending in September 2019. AAH is implementing nutritional surveillance, sensitization and conditional cash assistance, targeting food insecure families, particularly those with identified malnourished family members, pregnant and lactating women, and under-five children and other vulnerable groups. The project which will be implemented until December in the municipalities of Ganassi and Pualas, Lanao del Sur, including transitory sites in Marawi. AAH already screened 1,500 PLWs and under-five children and 1,000 households for the conditional cash transfer which will be released in September.

The Nutrition sector will continue to work with local government agencies, local government units and partners to strengthen community-based health and nutrition service delivery by investing in the Provincial-led Plan of Action for Nutrition which is geared towards increasing coverage and improving nutrition outcomes.

## PROTECTION INCLUDING CP AND GBV



Protection gaps continue in information management systems to monitor and track IDPs, as well as monitor the resolution of protection issues, access to assistance, information and grievance and redress mechanism. Limited functionality of local protection mechanisms will be addressed by Protection forum members and support to government in leading coordination mechanism will be enhanced. The sector plans to continue its support in strengthening the capacities of government sectors and partners at various levels in areas of disaster risk reduction, leadership coordination, recovery and rehabilitation, mine-risk education, child protection and gender-based violence activities, among others.

The Protection Forum members continue to facilitate birth registration for more than 7,000 displaced people affected by the Marawi conflict, including its host community members. Continuing activities include the conduct of regular protection forum meetings, advocacy and referral of key protection issues/concerns identified through field monitoring. Access to information, especially on

government interventions for the IDPs is being strengthened through a text hotline managed by UNHCR. In April 2019, a Joint Protection Monitoring Mission was conducted by the Protection Forum members focusing on homebased IDPs in Iligan City, Lanao Del Norte and Lanao Del Sur. Care Philippines trained 44 IDPs as protection monitors in July, focused on CCCM, Gender-Based Violence (GBV), and protection reporting. They also provided solar lamps in various ECs, including at CRS managed transitory sites and Pagalamatan permanent shelter site in Saguiaran. CFSI released 266 civil documentations and assisted 3,050 ongoing application of IDPs with the Local Civil Registrar in Marawi City, targeting 13,000 people for civil registration. UNICEF conducted capacity assessment of MSS-BARMM in July and strategic planning with the same agency in August.

Gender-Based Violence (GBV) and Child Protection (CP) in emergencies capacity enhancement training was conducted by the Joint Regional CP and GBV Working Group (JRCP-GBV WG) for local service providers. Technical assistance has been provided by UNFPA to the Marawi City Social Welfare and Development Office (CSWDO) and to the Women and Child Protection Unit (WCPU) of Amal Pakpak Medical Center in Marawi City on responding to GBV cases. Based on the GBV Working Group monitoring, 17 cases of GBV and other forms of sexual violence were referred and provided with response through the WCPU, between October 2018 and June 2019. Other activities focusing on protection of women and children include: integration of awareness- raising activities in the monthly plans of the CSWDO, capacity-building of the Local Committee Against Trafficking-Violence Against Women and their Children (LCAT-VAWC) member agencies on rights-based and survivor-centered approach for GBV-prevention. Awareness- raising information sessions are also conducted by the JRCP-GBV working group on Child Protection in Emergencies and Gender-Based Violence in Emergencies and Community-based Emergencies (CPIE and GBViE) and Community-based Disaster Risk Reduction and Management (CBDRMM) for 49 IDPs in Sarimanok Transfer Area. Women's rights and GBV awareness raising sessions in Women Friendly Spaces have been held in Marawi City, Piagapo, Saguiaran, Marantao, Bubong and Ditsaan-Ramain as well as among

women leaders in return areas. Family conversations were also conducted in 18 barangays in Marawi City. CFSI trained 300 IDPs on CP-GBV and Psychosocial support in Marawi and three municipalities of Lanao del Sur.

## WATER, SANITATION AND HYGIENE (WASH)



In March 2019, the WASH cluster coordination was handed over to the Marawi City LGU. An Executive Order is under review by the City Legal Office for the proposed WASH Committee to be chaired by the City Health Office, which will serve as the succeeding coordinating mechanism for the sector.

Although the emphasis shifted to early recovery and rehabilitation, there are still residual humanitarian WASH needs in IDP areas inside and outside Marawi, both for the formally recognized ECs and in the informal settlements. Based on June 2019 MHT assessment, WASH facilities, especially sanitation facilities in evacuation sites and transitory sites are either not functioning, are poorly maintained and not regularly desludged. Some transitory sites have limited access to safe water for drinking and domestic use. Where water trucking is still done by AAH and Red Cross, solid waste management is poorly practiced.

In July, Care Philippines desludged full septic tanks in Balo-I, Saguiaran and in Brgy Datu Saber, Marawi City. They also prepositioned 380 boxes of water purifier tabs with the Integrated Provincial Health Office (IPHO) – Lanao del Sur. AAH is 70 per cent complete in its various WASH projects in the province, handing over 5-unit latrines in Piagapo municipality. AAH is rehabilitating part of the Marawi water system including Bangon pumping station that can serve 19 barangays in the Least Affected Area (LAA). Samaritan's Purse provided water catchment barrels in two barangays in Saguiaran, constructed 6 Material Recovery Facility and conducted health promotion with IDP leaders in Sagonsongan Transitory Site. CRS is conducting assessment in Marawi, Saguiaran, Balo-I and Marantao for its WASH project. Save the Children conducted health promotion and provided water dispensers in various schools in Lanao provinces. Plan International- German National Office, distributed

500 hygiene kits in Boganga transitory site in August 2019. WASH partners still working in Marawi and nearby municipalities need to provide support to address gaps in WASH until the IDPs in the tent sites and evacuation centres are transferred to transitory shelters.

Even prior to the conflict, WASH has been longstanding issue in Lanao del Sur and Marawi City. In 2017, the city and province had the lowest nation-wide water coverage, with only 11.4% and 25.10%, respectively, people having access to safe water. Similarly, Marawi City has only 17% toilet coverage and Lanao del Sur, 11 % coverage. Acute watery diarrhea is the 3rd leading disease in the entire BARMM, directly attributed to poor WASH conditions. WASH partners consider interventions that will have longer impact, such as technical assistance to the government system strengthening, capacity building to LGUs to deliver basic WASH services.

## PRIVATE SECTOR ENGAGEMENT



The Philippine Disaster Resilience Foundation (PDRF) has supported Marawi response since 2018. With support from USAID – Surge (Strengthening Urban Resilience for Growth with Equity), four livelihood projects and education support were rendered to affected people of Marawi. While other projects such as WASH, Health and two more education projects were supported by Metrobank, Pepsi Cola Philippines and Project Handclasp Foundation- US-Philippines Society.

## COORDINATION



Members of the Mindanao Humanitarian Team (MHT), composed of UN agencies, national and international NGOs continue to meet in Cotabato for Mindanao-wide response and monitoring and MHT-Iligan to cover the Marawi response. The MHT aims to facilitate a coordinated and effective response to the residual humanitarian and early recovery

needs of displaced people living in various locations. OCHA chairs and provides strategic and secretariat support to these coordination forums. To ensure humanitarian efforts complement the Government response, MHT agencies are supporting Government-led sectors on Education, Protection, Joint Regional CP-GBV working group and Livelihood that continue to meet regularly. The MHT in Cotabato works with the BARMM Government for its response and response preparedness efforts, with the BARMM Ministries and the newly constituted Bangsamoro—Rapid Emergency Action for Disaster Incident (READI) for coordination. Joint coordination mechanisms between BARMM and MHT are held on a monthly basis at the regional level in Cotabato City and alternately held at the province level to bring regional coordination closer to affected communities. Further, joint TFBM and MHT meetings are held on ad hoc basis or as needed in Marawi City. OCHA is also conducting regular updating with the Marawi Local Government.

In July 2019, the MHT members held an internal stocktaking exercise to review the changing situation brought about by the transition of ARMM to BARMM, the responses to recent emergencies and to review priorities of actions and adjustments needed to ensure MHT's best contribution to BARMM. These contributions include strengthening government's capacities for disaster risk reduction, preparedness and response. Acknowledging that displacements persist and that there are windows of opportunity to look into current responses in protracted emergencies by using the development and peace lens, the team agreed that the current coordination structure should be oriented towards supporting the humanitarian—development—peace nexus. The MHT terms of reference have been updated to incorporate this more inclusive approach and workplan developed to reflect the institutional support and activities the members plan to undertake with the new Bangsamoro government.

The MHT meets regularly to analyze the humanitarian situation in Mindanao particularly, the response to Marawi displacements. Several multi-sectoral activities are currently concentrated in the province of Lanao de I Sur. OCHA maintains, develops and produces regular information management products to support the work of the humanitarian community, such as updated contact lists, 3Ws, maps, infographics and digital situation report.

## HUMANITARIAN RESPONSE AND EARLY RECOVERY STRATEGY

### JANUARY TO DECEMBER 2019



With more than 66,000 people remaining displaced and unlikely to return home soon, the priority is to address the continuing basic humanitarian needs of the most vulnerable and marginalized people among those impacted by the conflict, including those in various states of displacement and their host communities. In the coming months, members of the Humanitarian Country Team will maintain coordination mechanisms and integrate programming with that of national and sub-national government and the programmes of other stakeholders to improve accountability and access to information and services. The approach aims to sustain the programmes, once integrated with counterpart institutions. The HCT works in partnerships with government, private sector and other stakeholders to support early recovery and peacebuilding among the targeted groups. Sustainable recovery, protection, gender and adoption of culturally sensitive approaches are cross-cutting themes for all clusters. To better facilitate the response, the clusters of the Mindanao Humanitarian Team are aligned with the sector coordination structure under the Government's Task Force Bangon Marawi, which are: food security, agriculture and livelihoods; protection, including gender-based violence and child protection; shelter and camp coordination and management; health including reproductive health, mental health and psychosocial services; nutrition and water, sanitation and hygiene. The WASH cluster was handed over to the leadership of the Marawi authorities in the first quarter of 2019 to ensure sustainability in responding to WASH needs of the displaced population. The Government estimates that the rebuilding and rehabilitation of the 24 most affected barangays will not be completed until 2021, which brings to the fore the imperative for a longer-term and more strategic approach. Given the resource and capacity limitations of humanitarian actors, strong partnership and continued joint planning with Government agencies will help enable sustainability of the planned interventions and ensure resource complementation rather than substitution. With more actors joining the rehabilitation space in Marawi, UN and NGO

partners on the ground are encouraged to explore linking seamlessly the humanitarian response to the overall recovery, and peacebuilding efforts of different stakeholders, with the end view that such efforts will lead to sustainable solutions, encourage social cohesion and build more resilient communities.

## HUMANITARIAN NEEDS AND PROPOSED ACTIONS



While some 230,000 people have already returned to Marawi City, more than 66,000 remain displaced. The proposed closure of the remaining five officially recognized evacuation centres will contribute to the uncertainties and challenges faced by people in these locations as they transferred to the transitory sites.

The June 2019 MHT assessment in evacuation centers and transitory sites identified the needs of IDPs and biggest response gaps in WASH, camp coordination and camp management, protection, health and food security. Additional financial and material resources are needed in these sectors to ensure that people who remain displaced do not become critically vulnerable.

The needs of home-based IDPs will be clearer once the registration and profiling of the displaced is completed. Profiling of IDP renters has commenced in August. Protection concerns were raised on possible exclusion as this category of displaced may have limited access to humanitarian support and basic services. Access to accurate, timely and relevant information, and effectiveness of grievance and feedback mechanisms is a concern. Food support is highlighted as a continuing need and the safe and reliable supply of water remains a challenge, especially in evacuation centres and transitory sites. Vulnerability runs high in Lanao del Sur, being the poorest province in the country. Displaced people and host communities alike are challenged to adapt to the demands brought forth by the economic and social disruption arising from the conflict. Malnutrition is expected to increase as displacement continues, aggravated by poor access to water, loss of property and livelihoods.

Even before the conflict, 5 out of 10 children in Lanao del Sur were categorized as malnourished. Continued support for displaced people and dislocated communities throughout Lanao del Sur is therefore essential. But the situation inside Marawi City needs priority and continuous support, both to meet basic humanitarian needs and address protection concerns. As the government continues to clear debris and detonate unexploded ordnance (UXO) in the most affected areas in Marawi, raising awareness of the dangers of UXOs needs to continue.



Credit: OCHA

## FUNDING STATUS

From January to August 2019, the total funding received for the Marawi City conflict is US \$ 28.4 million. Based on the available information, the funding will cover expenses for projects and response activities that cover Marawi City only or parts of Mindanao that include Marawi City. It also covers humanitarian and recovery activities and development activities with humanitarian components. Almost half of the funding received is allotted for livelihood and shelter responses. Australia, Japan and the United States of America are the top three donors for Marawi City and the rest of Mindanao.

**36.1 M**  
revised 2019 funding requirements (US\$)

**28.4\* M**  
funding received (US\$)  
as of July 2019

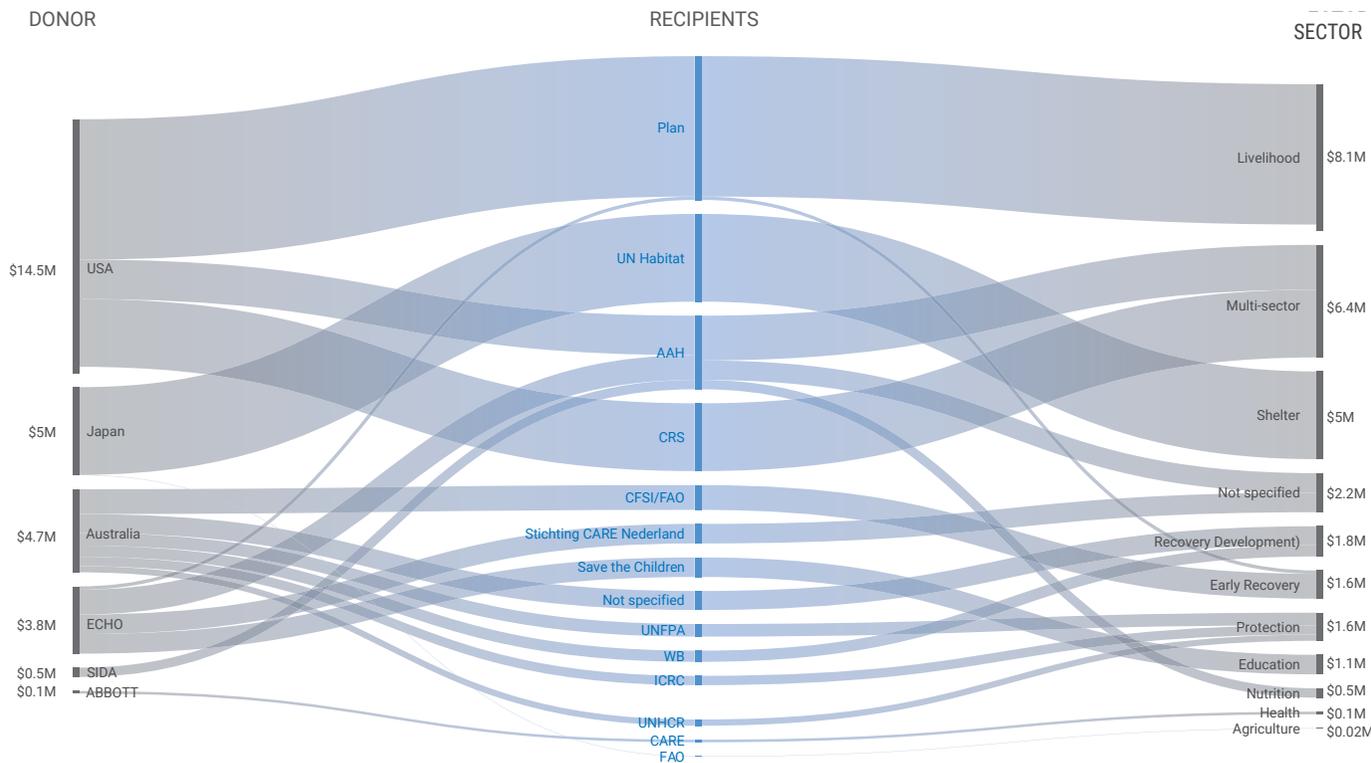
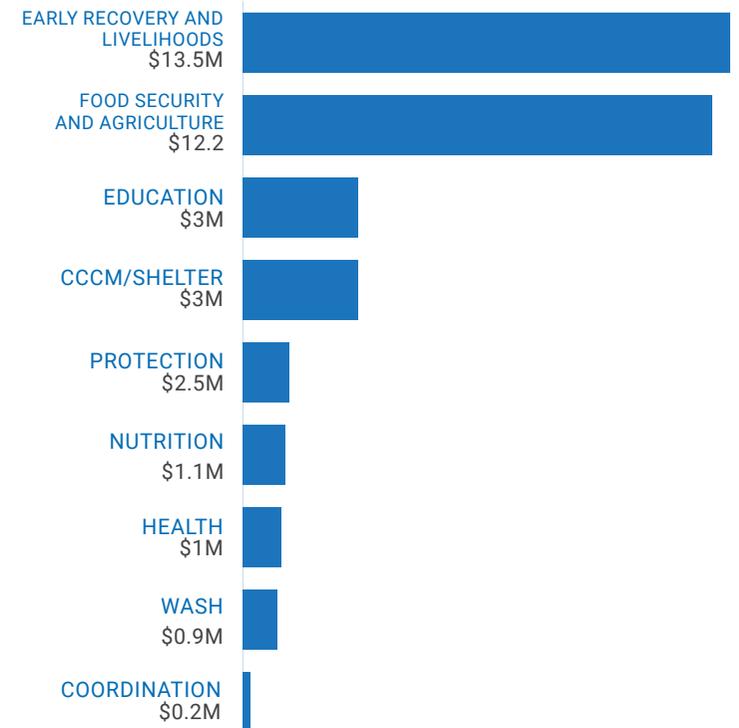
**1.84B**  
revised 2019 funding requirements (Php)

**1.4B**  
funding received (Php)  
as of July 2019

## FUNDING REQUIREMENTS

Under the revised HRRO, agencies are seeking \$36.1 million in 2019 that will help maintain interventions through the remaining part of the year and into 2020 to address unmet humanitarian needs, including continuous protection monitoring, early recovery and livelihood support.

REVISED 2019 FUNDING REQUIREMENTS BY CLUSTER (MILLION USD)



\* - Based on reports from FTS, donors, partner agencies and media. It includes projects that covers whole of Mindanao and humanitarian and development activities

Funding from Japan for UN Habitat is part of a multi-year grant of USD 10 million for permanent housing and livelihoods

## HUMANITARIAN NEEDS AND PROPOSED ACTIONS

# CAMP COORDINATION AND CAMP MANAGEMENT (CCCM) AND SHELTER

**Target areas:** Evacuation centres, transitory sites and host communities

**Target beneficiaries:** 66,000 people

**Funding required:** \$3,000,000

**Lead:** Ministry of Social Services - BARMM

**Co-Lead:** International Organisation for Migration (IOM)

The June 2019 MHT needs assessment report identified Shelter and CCCM as serious concerns in the remaining temporary shelters and some transitional sites. 350 IDP families are still living in tents suffering from extreme temperatures, hot during daytime and cold in the evenings resulting to illnesses especially among the children and elderly. Since the tents are now dilapidated after more than two years, IDPs are exposed to the elements and vulnerable during the typhoon season. IDPs have expressed their need to replace their old and worn-out tents especially in anticipation of the incoming typhoon season. Alongside, due to lack of proper camp management support, there has been no continued provision of necessary camp services such as regular provision of food packs and NFIs, maintenance of sanitation facilities, mobile health clinics and consultations to enable the IDPs to air their concerns and grievances. Only a handful of the trained camp managers and IDP leaders have remained who lacked the capacity to do sustained coordination and referral of needs to service providers and assisting agencies.

Even home-based IDPs, who compose the majority of the still displaced population, and their host families are also in need of continued shelter support. Due to dwindling resources and humanitarian assistance, they find it more difficult to maintain their hosting status and some IDP families are forced to transfer to the existing sites in Sarimanok and Bido Buadi itowa and occupy tents that were vacated by those who had moved on to the transitory sites. Those who have remained with their host families need shelter materials for extension of living spaces.

## INDICATIVE PLANS

- Upgrade and maintenance of camp facilities including replacement of tents with transitional shelters and retrofit materials for hosted IDPs to provide safer, dignified and protective dwelling to IDPs.
- Deployment of dedicated Camp Managers in the displacement sites to ensure sustained provision, coordination and referrals of camp services and humanitarian assistance.
- Tracking of displaced populations and their continuing needs including the homebased and their host families
- Community-level consultations and information campaign on durable solutions particularly on housing and livelihood opportunities for the IDPs.



Credit: OCHA

## HUMANITARIAN NEEDS AND PROPOSED ACTIONS



# EARLY RECOVERY AND LIVELIHOODS

**Target areas: Marawi City and Lanao Del Sur province**

**Target beneficiaries: 15,000 people**

**Funding required: \$13,500,000**

**Lead: International/Local Organizations and Relevant Government Institutions Co-Lead: United Nations Development Programme**

The armed conflict in Marawi and other parts of Lanao del Sur caused substantial damage and loss to public and private assets and disrupted businesses and other sources of employment. As of July 2018, an estimated 73% of the families displaced during the five-month armed conflict in Marawi City have already voluntarily returned to 72 of 96 barangays affected by the hostilities, which the government has cleared and declared accessible. While displaced, most returned families have depleted their resources and are struggling to restore their essential livelihood. The entire area, once a flourishing trade region, has lost its previous dynamism. While the local economy is still moving the first steps towards recovery, social cohesion is further weakened as a result of the displacement and return dynamics.

Through the intervention of the Government and other agencies, local markets have started to operate, and commerce has emerged in the area. However, there is still a need to accelerate and support the socio-economic activities. Substantial assistance is needed for the IDPs to have a ready access to appropriate financial resources to start, improve or recover their businesses and livelihood activities.

With the aim of complementing the efforts towards the sustainable rehabilitation of Marawi City, there is a need to further strengthen the resilience of the most vulnerable returnee communities through an integrated action including vocational capacity building, family livelihoods restoration, rehabilitation of critical social infrastructure, support to market-oriented social entrepreneurship and social cohesion activities. Bearing in mind the socio-cultural richness that characterize communities in the affected areas, activities will be prioritized, owned and driven by the communities themselves, through inclusive and participatory decision-making mechanisms.

Support for micro, small and medium enterprise for women and men IDPs, will be prioritized to contribute to the creation of alternative economic opportunities that give people a stake in the local economy. The desired outcome is a sustainable financial system that offers immediate assistance and develops the capacity of the IDPs to manage their personal and business finances effectively.

As the response transitions from humanitarian to development, there is a need to scale up the interventions in Marawi. The proposed response/indicative plans below aim to reach 15,000 individuals or 25% of the remaining 66,000 still displaced. These interventions are essential to ensure that the displaced populations have access to assistance and have access to appropriate financial resources to start, improve or recover their businesses and livelihood activities to build the foundations for a long-term development.

### PRIORITY RESPONSE/INDICATIVE PLANS:

- Identification, prioritization and validation of beneficiary communities, families and individuals in need of livelihood and other forms of early recovery assistance
- Community assessment and profiling, including critical elements of market analysis and mapping, livelihood inventory and market assessment for asset recovery
- Implementation of vocational, livelihood and other skills training, to ensure beneficiaries' safety and sustainability of the implemented action
- Identification and merchandizing of community merchants
- Community-based digital card distribution
- Real time cash transfer
- Family livelihoods restoration
- Support market-oriented social entrepreneurship and social cohesion
- Strengthening of community-based accountability mechanisms, to ensure community ownership of implemented projects, as well as inclusive and participatory governance as means to increase community resilience and project sustainability
- Restoration of critical community-level social infrastructure to stimulate the local economy and increase social cohesion

## HUMANITARIAN NEEDS AND PROPOSED ACTIONS

### EDUCATION

**Target areas:** **Lanano del Sur:** Bacolod-Kalawi, Balindong, Bubong, Butig, Ditsaan-Ramain, Lumbah bayabao, Marantao, Masiu, Piagapo, Poona bayabao, Saguieran, Taraka, Buadiposo Buntong, Madalum, Tugaya, Malabang, Marawi City; **Lanao del Norte:** Pantar, Matungaw, Baloi, Pantao Ragat Munai, Matungao, Tangcal, Iligan City

**Target beneficiaries:** 125,004 conflict affected children and youth; 1,500 teachers, 300 school heads and other education workers; 600 parent and community leaders; 18 LGUs and at least 20 stakeholders mobilized to support back to school and stay in school initiatives

**Funding required:** \$3,000,000 (plus \$1 million under FSAC)

**Lead: Ministry of Education – BARMM/Co-Lead: UNICEF/Save the Children**

More than 200,000 children and adolescents were affected by the conflict in Marawi City (UNICEF Philippines 2017). In 2018, DepEd ARMM and its education partners crafted the “Back to School” and “Stay in School” initiatives (BTS/SiS), a comprehensive strategy to ensure school aged children and adolescents affected by the Marawi conflict go back to school and stay in school or access learning through provision of basic education services, skills training, emergency school feeding and peacebuilding.

In March 2019, the new BARMM Ministry of Basic, Higher and Technical Education and 24 civil society organisations (CSOs) and UN agencies participated in the Marawi Lanao Education Actions from Recovery to Normalisation (MLEARN) Strategy Formulation Workshop in Iligan City. As a follow up to the Back-to-School Stay-in-School (BTS/SiS) Strategy, the Education Sector of the Marawi response and recovery coordination mechanism convened to learn from various assessment findings and collectively reflect on how programmes will be designed as appropriate for normalisation and strategically aligned within the broader political environment of the Bangsamoro transition. The Marawi-LEARN becomes the common strategy for all education partners to do interventions for all learners affected by conflict and multiple deprivations in Marawi City and Lanao areas.

The strategy has five thematic areas: 1) access to quality education, 2) governance and policies, 3) data and information systems, 4) protection, and 5) cultural identity.

There is an urgent need to ensure that all children in Marawi and Lanao provinces are in school and holistically learning, developing, and transforming towards achievement of their full potential to become productive members in their communities.

### PRIORITY RESPONSE/INDICATIVE PLANS

- Conduct alternative learning strategies including support to early learning programs, engagement with Madrasah and private schools, conduct peacebuilding programs and life skills support for remaining out of school children and adolescents;
- Mobilize stakeholders, LGUs and community leaders to protect children from the effects of conflict, disruption of classes and recruitment by different armed groups;
- Conduct school recovery planning and provide school grants for additional makeshift classrooms and facilities, chairs and tables.
- Build the capacities of school officials and teachers on providing psychosocial support and train them on education in emergencies and other conflict sensitive pedagogies to ensure continued education service delivery.
- Develop teaching and learning materials that incorporate Islamic values, DRR, peace education and human rights and the promotion of culture and history of the Bangsamoro.
- Coordinate and mobilize other sectors to support education on the provision of feeding programs, livelihood for parents, health and nutrition for learners particularly those that are living in transitory sites in Sagongsongan, Sarimanok, and Bahay Pag-asa and those in newly opened schools in the far-flung areas in Lanao Norte and Lanao Sur.
- Establishment of sites offering early learning
- Increase and strengthen the implementation of ALIVE program (hire more qualified teachers)
- Improved data and information system managed by Ministry of Education
- Review and formulate programs that enable safe and sustainable learning and teaching in high - risk areas/communities
- Peace Education is integrated in all levels of Education
- Development of a relevant & context -based curriculum

## HUMANITARIAN NEEDS AND PROPOSED ACTIONS

# FOOD SECURITY AND AGRICULTURE

**Target areas:** Marawi City and surrounding and underserved conflict-affected municipalities, Lanao Del Sur province

**Target areas:** Returned areas, home-based communities and Evacuation Centers

**Target beneficiaries:** 93,600 people including farmers, fishers and school children, pregnant and lactating mothers (80% of previous target) = 18,720 households (HHs)

15,000 HHs (80% of target HHs)

**Funding required:** \$12,250,000 (Includes 2.1 million USD for Nutrition and Education; covers 12 months for FAO and 3 months for WFP)

**The funding required is significantly reduced as it is now more focused to HH in need, community capacity building and linked to humanitarian nexus**

**Lead:** Ministry of Agriculture, Fisheries and Agrarian Reform (MAFAR)/Ministry of Social Services (MSS)

**Co-Lead:** Food and Agriculture Organization of the United Nations (FAO) and World Food Programme (WFP)

Although Marawi City and the affected municipalities have been recovering from this armed conflict with the relief and early recovery efforts carried out by various organizations, given the scale of the destruction and very poor living conditions, efforts to support sustainable recovery must continue. In particular, assistance should focus on returned IDPs and municipalities that served as host communities to the displaced persons from Marawi City. The underserved people from these areas further deteriorate their poor living conditions with decreased access to basic services and economic opportunities, disruption of livelihoods, and further negating the development of their resource potentials.

Below are some of the needs and gaps to be addressed:

- Daily dietary requirements of people with no or limited livelihood opportunities, and those people attending livelihood activities
- Agriculture and fisheries-based livelihood starter inputs, for farmers and fishers to re-engage in production and enterprise activities
- Capacity-building for Community-Based Organizations (CBOs) to engage in resilient agri-based livelihoods/enterprises along the value chain approach
- Production/enterprise development financing/credit facilities

## PRIORITY RESPONSE/INDICATIVE PLANS

- Cash-based interventions (conditional and unconditional) food assistance, prioritizing household with pregnant, lactating mothers and school children
- Cash for work/Food for work interventions focusing on agriculture-based livelihoods and production activities
- Provision of agriculture and fisheries starter inputs for farmers and fishers to enable them to engage in production and enterprise development, including post-harvest processing
- Implement urban gardening in transitional shelters in Marawi City to augment food needs and ensure nutrition requirements
- Linking CBOs who are engaged in enterprises to credit/financing institutions and markets
- Conduct technical training package and mentoring activities for CBOs, on business management, financial

## HUMANITARIAN NEEDS AND PROPOSED ACTIONS



## HEALTH INCLUDING MHPSS AND SRH

**Target Areas:** Marawi City, remaining five Evacuation Centers and fifteen transitory sites and main health facilities of Lanao del Sur and Marawi City

**Target beneficiaries:** 3,500 people inside ECs and 10,785 people inside transitory sites

**Funding required:** \$1,027,000

**Lead:** Ministry of Health - BARMM

**Co-Leads:** WHO (Health and MHPSS) / UNFPA (Sexual and Reproductive Health)/UNICEF (Maternal and Child Health)

Recurring Gaps that need to be addressed by the health (including Mental Health Psychosocial Services (MHPSS) and Sexual Reproductive Health (SRH)) sector include:

- Limited access to essential health services including sexual and reproductive health services especially in evacuation centers/ transitional shelters and unrecognized settlements and among home-based IDPs
- No health station and/or regular posting of health personnel in the evacuation centers and transitory sites
- Limited capacity in terms of availability of health human resource and medical equipment in transitory sites
- Limited supply of basic drugs, medicines and supplies and family planning commodities
- Poor health data
- Inadequate number of adolescent-friendly health facilities in Marawi and Lanao del Sur to deliver age appropriate health information and services to young people (There is only 1 adolescent-friendly health facility in Lanao del Sur and none in Marawi City.)
- Health risks associated with continued practice of home-based and traditional birth attendance

### INDICATIVE PLANS

- Strengthen capacities of existing health facilities and staff to deliver primary care services through;
  1. Hiring of additional health staff (midwife, nurses and doctors)
  2. Conduct training and mentoring of MHPSS and MCH services including vaccination during emergencies

3. Technical support on Supply Chain and Cold Chain Management

- Continue health interventions to prevent outbreaks, mortalities and morbidities due to communicable and non-communicable diseases and prevent maternal and neonatal morbidities and mortalities through:

1. Establishment of temporary health facilities with access to primary health care and essential medicines, in the transitory sites and remaining evacuation centers where no access to health services
2. Establishment of disease surveillance and outbreak control at the LGU level.
3. Improve disaster preparedness and delivery of health services through:
4. Support to information and data management including regular disease surveillance reporting
5. Capacity building on Sub-PHEMAP, DRRM-H Planning and Hospital Safety index

### Sexual and Reproductive Health(SRH)

- Support to strengthen demand generation on SRH through:

1. Cash transfer to Pregnant and Lactating Women (PLW) to increase Ante Natal Care (ANC), Facility Based Delivery (FBD), and Post Partum (PP visit)
2. Comprehensive Sexuality Education
3. Integration of TBAs into service delivery network through cash transfer incentivization
4. Youth Leadership and Governance Program

» Support to service delivery through the provision of RH medicines, equipment, and supplies

» Support to health systems through Lot Quality Assurance System (LQAS) for Family Planning

» Support to strengthen health systems precondition on SRH through:

1. Clinical Management of Rape
2. Inter-generational dialogues on key RH issues
3. Family Planning (FP) Bottleneck analysis for those furthest left behind
4. Track and Trace (barcode technology LMIS)
5. RH Multi-Year Costed Implementation Plans (CIP)

HUMANITARIAN NEEDS AND PROPOSED ACTIONS



**Target areas:** Home-based communities especially other municipalities affected in Lanao del Sur **Target areas:** Home-based communities especially other municipalities affected in Lanao del Sur and Lanao del Norte

**Target beneficiaries:** 0-5-year-old children: at least 70,000; PLW: at least 25,000; RHU and Hospital staff: 300; Barangay Nutrition Scholars): 1,159

**Funding required:** \$1,146,656 (plus \$1.1 million under Food Security and Agriculture Cluster (FSAC))

**Lead:** Ministry of Health - BARMM

**Co-Lead:** UNICEF

Nutrition interventions have kept acute malnutrition (wasting) among children under-five years below the emergency threshold (10% and above); nonetheless it slightly increased from 5% to 7.9% between the two EFSA assessments conducted in February and September 2018. Chronic malnutrition (stunting), also increased from 40% to 43%. Despite the interventions, the quality and quantity of food eaten by children and pregnant and lactating women is poor, contributing to acute malnutrition. Children 6-23 months eating the minimum acceptable diet has slightly increased but is still very low (from 11.9% to 16%), the same finding was observed for minimum diet diversity (13.7% to 27%). Pregnant and lactating women (PLW) are still eating less diverse food which has even decreased from 47.1% to 43.5%. Food inadequacy and insufficient health care services are the immediate causes of malnutrition. Without continued support, malnutrition in Lanao del Sur is expected to worsen as displacement continues. Livelihood re-establishment has just started, and access to water is not yet fully assured for the affected communities. The country is entering the typhoon season and there has been a surge in epidemics such as measles and dengue. Before the conflict, the province had the highest prevalence of malnutrition in the country, with 5 out of 10 children categorized as undernourished..

In 2018, the cluster supported the capacity development of the local government partners (provincial health offices and rural health units) in delivering life-saving nutrition interventions for children and pregnant and lactating women (PLW). The support included: a) assistance in the assessment and monitoring of the children and PLW nutritional status; b) strengthening the community-based nutrition service delivery through the mobilization of Barangay Nutrition Scholars (BNS) to identify, prevent and manage children with acute malnutrition including the nutritionally at risk Pregnant and Lactating Women; and c) improving local government inter-agency coordination and ownership through the issuance of policies and ordinances, prioritizing and allocating budget for nutrition-specific (e.g. allowances of BNS) and nutrition-sensitive

interventions (e.g. improvement of water and sanitation facilities).

These interventions, though pursued in the humanitarian context, are foundations to strengthening nutrition systems and improving nutrition services of the entire province of Lanao del Sur.

INDICATIVE PLANS

For the remaining part of 2019, the Nutrition Cluster will continue to work with the local government, line agencies, and other partners to further strengthen community-based health and nutrition service delivery by investing in and supporting the Provincial--led Plan of Action for Nutrition (ProvPAN) geared towards increasing coverage and improving nutrition outcomes. This includes: a) micronutrient supplementation, b) dietary supplementation, c) support to breastfeeding, d) provision of human resources (training, hiring and mobilization of Barangay Nutrition Scholars), e) referral and linkage of PLWs and households with undernourished children to other networks for other nutrition supportive activities (e.g. livelihood assistance, social safety net program, protection services, etc.), and f) supporting enabling environment such as development of policies, programs and guidelines and advocacy activities. The strategy for nutrition emphasizes recovery more than relief operations, leaving no one behind and prioritizing the most needy while building resilience and working towards self-sustainability. Recognizing that beneficiaries are shifting from being in the evacuation centers/transitory sites to living in host communities outside of Marawi City.

## HUMANITARIAN NEEDS AND PROPOSED ACTIONS



# PROTECTION INCLUDING CHILD PROTECTION AND GENDER-BASED VIOLENCE

**Target areas:** Evacuation centres, transitory sites, host communities in Marawi City; host communities elsewhere in Lanao del Sur and Lanao del Norte

**Target beneficiaries:** 300,000 people

**Funding required:** \$1,200,959 (including US\$350,000 for Child Protection)

**Lead:** Ministry of Social Services - BARMM

**Co-Lead:** UNHCR/UNFPA/UNICEF

Recurring gaps that need to be addressed by Protection cluster member agencies include:

- Support to government in leading coordination mechanism (inter-LGU, cluster coordination)
- Information management systems to monitor and track IDPs and monitor resolution of emerging protection issues
- Continued capacity-building for service providers on protection, Gender Based Violence (GBV) and Child Protection in Emergencies (CPIE) including reporting and referral mechanisms.
- Access to assistance (incl. access to viable livelihood for women and children and at-risk groups with priority on sexually abused hostage survivors and widows of hostages during the Marawi siege);
- Access to information and grievance redress mechanisms; participation in planning and implementation;
- Strengthening capacities of local social workers and community-based para social workers for the protection of children and other vulnerable population on case management, follow up and reintegration of children released from non-state armed groups, and provision of community-based psychosocial support services and facilitation of family tracing and reunification for UASC children with considerate attention to special needs of differently abled children.
- Limited functionality of local protection mechanisms such as Local Council on Anti Trafficking and Violence Against Women and Their Children (LCAT-VAWC), Local/Barangay Council for the Protection of Children (L/BCPC), VAW Desk

## INDICATIVE PLANS (SHORT AND LONG TERM)

- Continue support to the Ministry of Social Services of the Bangsamoro Autonomous Region in Muslim Mindanao (MSS-BARMM) including Provincial Local Government Units (PLGU) for leadership coordination of the Joint Child Protection Gender Based Violence Working Group.
- Review Joint CP-GBV recovery and rehabilitation strategy for Lanao Del Sur.
- GBV Working Group Lessons Learned Workshop
- Enhance capacities PLGU Provincial Disaster Risk and Reduction Management Office (PDRMO) on information management including sex and gender disaggregated data. Support for the establishment of database management system at the PLGU level.
- Incorporate protection principles in disaster and contingency planning at the municipal level
- Support capacity development for LGU Social Workers, Para Social Workers on case management, follow up and reintegration of children released from non-state armed groups, and community-based psychosocial support services, and gender-based violence. Capacity building of Muslim Religious Leaders (MRLs) and Traditional Leaders as influencers on preventing and responding to GBV and CP issues
- Build on existing work with Dawah Committee and Regional Darul Iftah on development and dissemination of child rights sermons across BARMM
- Continue monitoring, reporting, verification and referral of Grave Child rights Violations in armed conflict situations, specifically in the provinces of Lanao Del Sur and Lanao Del Norte.
- Support to Bangsamoro Transition through capacity building of Moro Islamic Liberation Front (MILF) ceasefire mechanisms and TWG under normalization, especially the women's medical team as first responders (specific to CP and GBV).
- Strengthening capacity of stakeholders and community on Mine Risk Education (MRE), especially in light of the rebuilding phase of the Bangon Marawi Rehabilitation and Recovery Plan
- Build capacity of stakeholders on housing, land and property
- Advocate for the provision of viable livelihood options and cash-based interventions for women, girls

## HUMANITARIAN NEEDS AND PROPOSED ACTIONS

# PROTECTION INCLUDING CHILD PROTECTION AND GENDER-BASED VIOLENCE

and other at-risk groups.

- Engage adolescent and young people for life skills and/or self-employment opportunities, ADM, ALS, civic engagement including U-Report and active participation to youth development activities.
- Provide psychosocial Support to displaced and affected children and their families. PSS intervention linked with Education, Health Services and Viable Livelihood)
- Facilitate provision of immediate access of CP issue, and GBV survivors to life-saving and appropriate case management interventions through Women and Children Protection Units.
- Continued field monitoring and assessment of displacement sites, including IDP profiling, when needed
- Continue the facilitation of the Protection Forum, an inter-agency and multi-sectoral network of protection actors working on the Marawi response, for information-sharing, referrals, and advocacy
- Continue provision of core relief items that will enhance protection, especially for IDPs still living in evacuation camps and tent cities
- Continue operations of safe spaces for women and adolescent girls at community level and establishments of semi-permanent WFS as a platform to support women and girls' empowerment and participation in post-conflict recovery and rehabilitation, conflict prevention, and peacebuilding. This will also serve as a channel of correct information to IDPs (i.e. government recovery plans, services available to IDPs especially women and other at-risk groups such as women-headed households).
- Continuous awareness-raising on utilizing the community referral pathway to raise awareness among IDPs and the duty bearers.
- Information sessions on women's rights and other GBV-related laws and policies should also continue to improve survivors' help-seeking behaviour.
- Develop a C4D campaign on IDP rights and on prevention and response to GBV to influence a positive change in community values, practices and behaviors attributed to gender-based violence.
- Provide support at the policy level for the integration of GBV prevention and response programs and services in Gender and Development (GAD) plans and budgets.
- Conduct training/orientation to inter-agency protection mechanisms at community, city/municipal level

on rights-based, culturally sensitive, survivor-centered for CP and GBV prevention and response.

- Advocate for support and concrete program for the Marawi Hostage Survivors both at all levels (national, regional and local levels).
- Conduct Municipal Protection profiling (MPP) in order to provide an enumeration of protection strategies, solutions opportunities, and specific recommendations for immediate and long-term protection interventions by government and humanitarian actors.



Credit: OCHA

## HUMANITARIAN NEEDS AND PROPOSED ACTIONS



# WATER SANITATION AND HYGIENE

**Target areas:** Tent cities in Marawi City (Sarimanok 1 and Sarimanok 2), other evacuation centers/sites outside Marawi

**Target beneficiaries:** 64,284 people

**Funding required:** \$880,000

**Lead:** Ministry of Health - BARMM

**Co-Lead:** UNICEF

Over 104,000 displaced people in Lanao del Norte, Lanao del Sur and Marawi City have benefitted from water, sanitation and hygiene facilities, WASH items and intensive hygiene promotion interventions by both government and NGO WASH partners. Though significant outcomes have been achieved by the coordinated efforts of WASH Cluster partners, WASH remains a critical need with the evolving humanitarian situation that is now moving towards recovery, rehabilitation and development. Pre-existing WASH conditions in Marawi City and Lanao del Sur, amongst the poorest in the whole country, have greatly contributed to the insecurity of a population facing a protracted period of displacement.

The findings of the June 2019 MHT assessment point to significant needs and gaps on WASH especially in the tent cities of Sarimanok 1 and Sarimanok 2 in Marawi City, and the other evacuation centers/sites outside Marawi City. IDPs in these remaining evacuation centers/sites and in the tent cities, even those in newly-constructed transitory sites, have limited access to safe water for drinking with many sites still relying on water trucking. The limited supply of water has contributed to non-usage and/or poor maintenance of sanitation facilities. Regular desludging of temporary toilets in the evacuation centers/sites and tent cities (including toilets in the Transitory Shelters) and solid waste management need to be established or re-established. Hygiene promotion activities need to be carried out regularly, including by organizing WASH committees among IDPs to monitor, reporting on WASH situation and ensuring facilities are well maintained.

WASH has been a longstanding issue in Lanao del Sur municipalities and Marawi City even before the conflict. In 2017 Marawi City and Lanao de Sur had the lowest water coverage in the entire country with access to safe water supply of only 11.4% and 25.10% respectively. Marawi City only has 17% toilet coverage and Lanao del Sur, only 11% coverage. Acute watery diarrhea is the 3rd leading disease in the entire BARMM and directly attributed to poor WASH conditions. Because of this, partners will consider interventions with longer term impact to the WASH situation in Lanao del Sur province in general. Such interventions include

technical assistance to government systems strengthening, capacity building to LGUs to deliver basic WASH services to significantly expand water and sanitation coverage.

### INDICATIVE PLANS

**Short term: tent cities, evacuation centers, transitory sites**

With the delay in IDPs' transfer from evacuation sites to tent cities and eventually to transitory shelters, WASH partners need to work together with the LGUs/line agencies to address the residual humanitarian WASH needs with the following activities:

- Technical assistance to Government-led coordination amongst LGUs, government line agencies, and other sectors to improve WASH services to IDPs – including continued assessment, monitoring and surveillance of WASH situation.
- Capacity-building and/or provision of technical assistance to LGUs, line agencies, and IDP committees on WASH situation monitoring and reporting, hygiene promotion, and WASH facilities maintenance.
- Technical assistance for the development of a durable solution for water to improve access to safe water for drinking and for other purposes, including short term augmentation support to water trucking.
- Repair and/or rehabilitation of sanitation facilities, including support to desludging and intensified hygiene promotion and solid waste management related activities

**Long term: Home-based areas, LDS municipalities**

WASH interventions with long term impact:

- Capacity building to LGUs, government line agencies, and other sectors to improve WASH services and coverage
- Strengthen enabling environment, e.g., development of plans and policies supporting WASH, for sustainability of interventions towards development – including reactivation of government mechanisms and existing working groups and committees on WASH
- Provide technical assistance to LGUs to intensify Zero Open Defecation (ZOD) campaign of the Ministry of Health to ensure that all the affected population have proper sanitation facilities that meet the standards
- Provide communication for development and behavior change campaign interventions for better WASH outcomes contributing to the improvement of the overall nutritional status of the children in Lanao del Sur province and Marawi City

## HUMANITARIAN NEEDS AND PROPOSED ACTIONS

### COORDINATION

**Target areas:** Evacuation centres, host communities, transitional sites and returnees in Marawi City

**Target beneficiaries:** 300,000 people

**Funding required:** \$250,000.00

**Lead:** Government – Task Force Bangon Marawi/BARMM

**Co-Lead:** OCHA

Through its core coordination function, information management, advocacy and resources mobilization, OCHA supports the Marawi response primarily through its Iligan antenna office and Cotabato sub-office in Mindanao. At the height of the emergency, well over 100 partner organizations responded to the needs of people displaced by the conflict, which required effective coordination with the Government-led response. OCHA established a coordination hub in Iligan to ensure a strong link with the Government's Task Force Bangon Marawi, identify gaps to be addressed and advocate the targeting of the most vulnerable population.

The Mindanao Humanitarian Team in Iligan and Cotabato will continue to focus on outstanding humanitarian, protection, and early recovery needs of the Marawi IDPs and returnees and hold joint situation analysis, information sharing and coordinated sectoral response planning. OCHA will work with coordination structures established by the Government's Task Force Bangon Marawi in Iligan, and with the Marawi City authorities and at Bangsamoro Autonomous Region in Muslim Mindanao (BARMM) to ensure coherence with government-led assistance and identify priority needs. Its priorities include:

- Work closely with coordination structures established by the Government's Task Force Bangon Marawi in Iligan, and with the Marawi City authorities and at the newly constituted Rapid Emergency Action on Disaster Incident (READI) BARMM to ensure coherence with government-led assistance and jointly identify priority needs.
- Produce and share regular updates with partners and donors to advocate key humanitarian and recovery needs in the Marawi response
- Assist in the coordination of early recovery needs of the returnee population to advance sustainability of livelihoods working closely with TFBM and Marawi City.
- Coordinate joint MHT and BARMM meetings for the Marawi response. Sustain engagement on joint initiatives with the new authorities in BARMM to establish coordination and information management, ensuring the Marawi response remains a priority, at the regional and provincial levels.
- Facilitate coordination between Marawi City and Lanao del Sur Provincial Authorities and Mindanao

Humanitarian Team; and maintain collaboration with TFBM.

- Provide information on IDP movements and returns and who is doing what and where, including information on People in Need.
- Advocate for sustained community engagement to involve IDPs in the humanitarian and early recovery response. Support the established Protection Grievance Mechanism and linked process of Community Engagement with the Government - with TFBM taking the lead.
- Strengthen civil-military coordination through liaison and training with the military on humanitarian architecture, coordination, and principles.
- Assist in protection and gender mainstreaming in the response, including the prevention of sexual exploitation and abuse. Support initiatives that link the humanitarian response to longer-term recovery needs, including initiatives that build social cohesion and promote peace.
- In 2019, To reflect the changes in the humanitarian context in Mindanao and to bring humanitarian actors closer together with development and peacebuilding entities, particularly in BARMM, the MHT will expand its membership and will transition into Mindanao Coordination Team (MCT)



Credit: OCHA