Reporting period: 9 November 2013 – 10 January 2014

Philippines
Humanitarian
Situation Report

UNICEF and Partners Response to Date

**SITUATION IN NUMBERS**

Zamboanga Conflict

57,540
Children affected out of 137,000 people affected
(OCHA Nov, 2013)

25,620
Children displaced out of 61,000 displaced people
(OCHA Nov, 2013)

UNICEF Appeal
Zamboanga Conflict
US$ 5.7 million

**Highlights**

- Currently, 61,000 people remain displaced in Zamboanga City, with over 23,000 people living in 10 evacuation centers and 3 transitional sites. Eight schools are currently being used in the city as evacuation centers.
- The Center for Health and Development in Zamboanga has documented 687 cases of acute watery diarrhoea since the onset of the crisis. The continuing lack of sanitation facilities coupled with poor waste and excreta management (collection, treatment and final disposal) and lack of bathing, hand washing and laundry facilities in many evacuation centres pose serious public health risks.
- As of 8 January, attendance rate for the 3 most affected schools in the critical zone was 31% (69 out of every 100 children enrolled are still out of school). In other affected areas attendance rates have increase to 89% in elementary schools and 78% in high schools.
- A total of 2,249 people (1032 women and 217 men) attended Psychosocial Support Services (PSS) on care practices, including hygiene and psychosocial techniques, infant and young child feeding, breastfeeding support, nutrition counselling, pregnancy, maternal and child care and family planning support.

UNICEF and Partners Response to Date

UNICEF has provided water purification tablets, jerry cans, water tanks and water bladders to 9 evacuation centers in Zamboanga, helping 13,000 people access clean and safe water. In addition, 58 gender disaggregated semi-permanent bathing cubicles and 130 semi-permanent latrines with hand-washing facilities have been constructed at evacuation centers and relocation sites in Zamboanga City, benefiting 13,800 people. Furthermore, 64 semi-permanent latrines have been distributed to 6 evacuation centres and 1 temporary learning centre to augment latrine facilities, which are benefiting 5,000 people.

UNICEF has established 6 child-friendly spaces (CFS) in evacuation centres, bringing the total number of CFS established in the affected areas to 13. UNICEF is currently scaling-up the number and reach of CFS in 2014 to take into account the displaced relocation efforts and the particular needs of adolescents. UNICEF has also provided an orientation for 35 members of the Armed Forces of the Philippines’ Task Force in Zamboanga on the Monitoring and Reporting Mechanism on grave child rights violations in situations of armed conflict.

UNICEF has established 20 temporary learning tents at evacuation centres in the city, benefiting over 1,000 children, and has provided psychosocial support services, through a partnership with the Community and Family Services International, for over 2,000 children attending child friendly spaces in the city.

Community-Based Management of Acute Malnutrition (CMAM) has been established in Zamboanga. Through UNICEF’s partnership with ACF, 90 health workers from the Zamboanga City Health Office and Zamboanga City Medical Centre were trained on the CMAM approach.

UNICEF has provided 13,000 people access clean and safe water.
Situation Overview & Humanitarian Needs

On 9 September 2013, fighting broke out between a faction of the Moro National Liberation Front and the Armed Forces of the Philippines in Santa Catalina, Zamboanga City in western Mindanao, and quickly spread to the nearby barangays of Santa Barbara, Rio Hondo and Mariki. By 12 September the situation had deteriorated further with more clashes reported in the nearby island province of Basilan in the Autonomous Region in Muslim Mindanao. More than 200 civilians were taken hostage by Moro National Liberation Front fighters including children who were used as human shields. On 28 September, the Government declared an end to the security crisis as all remaining hostages managed to escape or rescued by security forces.

The fighting has left at least 140 people dead, over 10,000 houses completely destroyed and more than 120,000 people forcibly displaced during the height of the conflict, according to government sources and humanitarian partners.

Many of the people, who were displaced initially by the conflict, have returned to their communities to find their homes damaged, looted, burned or completely destroyed. As of 24 December, over 63,000 people remain displaced in Zamboanga City, with over 23,000 people living in 10 evacuation centers and 3 transitional sites. Eight schools are currently being used in the city as evacuation centers. The government plans to resettle the residents still displaced in the city, however, relocation plans are still in the process of being developed, and the lack of available public land for relocation is proving problematic. Temporary relocation sites and shelters are being prepared throughout the city; however, there are concerns that there will not be enough shelters built to accommodate all families who have lost their homes.

The Center for Health and Development in Zamboanga has documented 687 cases of acute watery diarrhoea since the onset of the crisis. The continuing lack of sanitation facilities coupled with poor waste and excreta management (collection, treatment and final disposal) and lack of bathing, hand washing and laundry facilities in many evacuation centres pose serious public health risks. Severe flooding brought by heavy monsoon rains and enhanced by tropical cyclones between 1 and 11 October worsened the living conditions of the conflict-affected communities. Conditions inside the evacuation centers deteriorated as flood water and strong winds destroyed tents and inadequate drainage trapped muddy water. In addition, the floods delayed the construction of temporary shelters and WASH facilities.
Reporting period: 9 November 2013 – 10 January 2014

Prior to the conflict, 25% of children under the age of five in Zamboanga Peninsula were underweight, with 42% stunted and 7% in the state of wasting.

Immediately following the clashes, educational classes were suspended in the city. More than 12,000 students lost their schools in fires that razed the city, and many schools and day care centres in the city were used initially as evacuation centres. A total of 54 schools, including 7 day care centres, with over 90,000 school children have been affected, as classes were suspended throughout the city from the onset of the conflict. Severely affected were four public elementary schools in the critical zone, with 9,269 students displaced due to destruction of homes and their schools. The damage to education facilities has been estimated to cost US$2.4 million. Classes eventually resumed on 25 September, but with only around 3% of children back in schools. Overall attendance rates since then gradually increased. As of 8 January, based on student tracking results, attendance rate for the 3 most affected schools in the critical zone has increased to an average of 33% (69 out of every 100 children enrolled are still out of school). In other affected areas, however, including schools affected by conflict and floods, attendance rates have increase to 89% in elementary schools and 78% in high schools. Currently, 8 schools are still being used as evacuation centres, with about 4,385 individuals living inside. Temporary learning spaces through tents and tarpaulins have been established next to evacuation centres, transition sites and damaged schools. Displaced children have been absorbed by the host schools in the nearby area. Due to limited numbers of classrooms available, learning sessions have been operating on a shifting schedule on a daily basis.

Since September 2013, children in Zamboanga have been used by armed groups, killed and maimed in crossfire, recruited as combatants and otherwise used in the course of hostilities. The risk of sexual violence and exploitation of children, trafficking and solvent abuse have increased in the affected areas. The risk of gender-based violence (GBV) remains high due to congested evacuation centres, limited female police officers and a lack of partitions and privacy. Reporting to the proper authorities and referral for services for child protection and gender based violence cases remains a challenge, especially for the displaced population.

<table>
<thead>
<tr>
<th>Estimated affected population in Zamboanga City and Basilan</th>
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</thead>
<tbody>
<tr>
<td>(Estimates calculated based on figures from OCHA &amp; DSWD November 2013)</td>
</tr>
<tr>
<td><strong>Total</strong></td>
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<tr>
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</tr>
<tr>
<td>Total affected population</td>
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<tr>
<td>Children affected (Under 18 years)</td>
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<tr>
<td>Children under 5 years</td>
</tr>
<tr>
<td>Pregnant and lactating women</td>
</tr>
<tr>
<td>Total displaced population</td>
</tr>
<tr>
<td>Children displaced</td>
</tr>
</tbody>
</table>

**Humanitarian leadership and coordination**

The Department of Social Welfare and Development is the overall responsible agency for the Zamboanga disaster response. The relief efforts are coordinated with the City Government of Zamboanga headed by the mayor, while government regional offices have taken the lead in organizing the cluster response at the city level. UNICEF co-leads, with the government, the clusters of Water, Sanitation and Hygiene (WASH), Nutrition, Education (with Save the Children) and the Child Protection Working group.

The government requested the Humanitarian Country Team to technically support a joint rapid needs assessment in Zamboanga City, which took place on 16 September. The Humanitarian Country Team’s response was further scaled up with a USD$3 million grant from the UN Central Emergency Response Fund to implement life-saving activities.

The Humanitarian Country Team prepared a Revised Action Plan in October to address the priority needs of 128,600 affected people over a six month period, until March 2014. The Revised Action Plan is requesting USD$24 million and is a subset of the Philippine (Mindanao) Humanitarian Action Plan 2013, initially launched with the authorities in December 2012; of which UNICEF requested USD$5.7 million.

Return and resettlement have been planned through the Zamboanga City Roadmap to Recovery and Reconstruction (Z3R), approved on 22 December by the President. Z3R is targeting 33,000 people and 5,660 totally damaged and 194 partially damaged houses for reconstruction and repair over the next 6 to 18 months.
UNICEF Actions to date

Nutrition
In total, 2,810 children (aged 6-59 months) have been screened for malnutrition, with 157 cases of severe acute malnutrition and 193 cases of moderate acute malnutrition detected. To date, 350 children have been enrolled in treatment programmes. School feeding programmes, through the World Food Programme, are currently benefiting over 8,400 school children in two elementary schools in the city.

UNICEF and the WFP distributed therapeutic milk, Resomal and 250 boxes of ready-to-use therapeutic food to the Zamboanga City Health office and other partners. These supplies are sufficient enough to treat 250 children with acute malnutrition over a three to four month period. 650 food packs/baskets (consist of 50 kilos of rice, 5 kilos of beans, 3 litres of cooking oil) were distributed to the mothers of children with moderate and severe acute malnutrition as well as pregnant and lactating women staying at 3 different evacuation centres in the city.

Community-Based Management of Acute Malnutrition (CMAM) has been established in Zamboanga. Through UNICEF’s partnership with ACF, 90 health workers from the Zamboanga City Health Office and Zamboanga City Medical Centre were trained on the CMAM approach.

The Community-Based Management of Acute Malnutrition has four main components:

a. **Community Outreach**: Screening of children is done through Mid-Upper Arm Circumference (MUAC), height and weight measurements and edema. This is integrated in the Out-Patient Therapeutic Programme (OTP) where in-home visitations, follow-up visits and consultations are conducted once a child is diagnosed with moderate acute malnutrition.

b. **Out-Patient Management of Acute Malnutrition without Complications**: The treatment of severe acute malnutrition without complications using Ready-to-use-therapeutic food.

c. **In-Patient Management of Acute Malnutrition with Complications**: The treatment of severe acute malnutrition with complications using therapeutic milk and ready-to-use-therapeutic food in in-patient sites.

d. **Supplemental Feeding of Moderate Acute Malnutrition**: The treatment of moderate acute malnutrition without complications using ready-to-use supplementary food in the Supplementary Feeding Programme sites.

Six mother- and baby-friendly spaces for lactating and pregnant women have been established, with health workers (Barangay Nutrition Scholars and Barangay Health Workers) conducting Infant and Young Child Feeding (IYCF) counselling in all 13 evacuation centres.

Infant formula distribution was reported from the largest evacuation centre (Joaquin Enriquez Memorial Sports Complex); this issue was brought to the attention of the City Health Office and immediate action was taken. UNICEF was instrumental in facilitating breast milk donations from the Children’s Medical Center in Manila. The City Health Office and the Zamboanga City Medical Center conducts regular milk letting programmes in the different barangays of Zamboanga, encouraging lactating mothers to donate breast milk.

Child Protection
UNICEF has established 6 child-friendly spaces (CFS) in evacuation centers, transit sites and relocation areas, bringing the total number of CFS established in the affected areas to 13. Within these Child Friendly Spaces, structured psychosocial support activities by trained personnel, in addition to safe-play areas, are provided to over 2,000 children and adolescents each day. The CFS are also serving as entry points for the protection referral system, and are being used as Temporary Learning Spaces in areas that are short on classrooms. UNICEF and partners will increase the number and reach of CFS’ in 2014 to take into account the displaced relocation efforts and the particular needs of adolescents.

UNICEF provided an orientation for 35 members of the Armed Forces of the Philippines’ Task Force in Zamboanga on the Monitoring and Reporting Mechanism on grave child rights violations in situations of armed conflict. The participants were drawn from the Army, Air Force and Marine Corps. This training is part of the strategic plan between the UNICEF-led Philippine Country Task Force for Monitoring and Reporting and the Armed Forces of the Philippines. In addition, cluster partners have held orientations for over 500 members of safety and security committees, social
workers and volunteers on the prevention of, and response to the abuse, exploitation, violence and neglect of children, as well as gender based violence and grave child rights violations in situations of armed conflict.

Reported child protection and gender based violence cases are being monitored by the Department of Social Welfare and Development. As of December 2013, there have been 31 cases of violence against women and their children; 6 cases of alleged rape and 4 cases of trafficking. These cases are being followed up on by the Department of Social Welfare and CAPIN.

Six protection advocacy meetings have been conducted for at least 180 women and men who are members of Community Based Child Protection Networks. This is part of an orientation process to raise the profile of child protection issues and to assist communities to develop tools for better prevention and response to abuse, exploitation, violence and neglect.

Four children who were alleged to have been recruited by the Moro National Liberation Front and were detained at the Culianan Rehabilitation Centre have been released to their families and relatives after joint efforts from UNICEF and the Regional Human Rights Commission and Non-violent Peace-force.

Psychosocial support services were provided in two evacuation centres for 1,249 beneficiaries, including 1032 women and 217 men. Psychosocial services provided in the evacuation centres include: care practices on hygiene, pregnancy, baby baths, play sessions, relaxation techniques, private counselling, psychosocial drama, art and play therapy, infant and young child feeding, breastfeeding support, nutrition counselling, maternal and child care and family planning support.

UNICEF also promotes Inter Agency Standing Committee (IASC) Guidelines on Mental Health and Psychosocial Support (MHPSS), in particular UNICEF is supporting the Department of Social Welfare and Development with both recognising and standardising approaches to psychosocial support services beyond clinical mental health interventions, which can be harmful if not carried out by trained professionals. To this effect, UNICEF has facilitated the psychosocial support services component of two batches of Mental Health and Psychosocial Support Service trainings run by WHO and the Department of Health.

WASH
UNICEF has provided water purification tablets, jerry cans, water tanks and water bladders to 9 evacuation centers in Zamboanga, helping 13,000 people access clean and safe water. In addition, 58 gender disaggregated semi-permanent bathing cubicles and 130 semi-permanent latrines with hand-washing facilities have been constructed at evacuation centers and relocation sites in Zamboanga City, benefiting 13,800 people. Furthermore, 64 semi-permanent latrines have been distributed to 6 evacuation centres and 1 temporary learning centre to augment latrine facilities, which are benefiting 5,000 people. In addition, UNICEF has installed hand washing facilities (sink, water tank, jerry cans with hyposol) at 8 temporary learning spaces and child friendly spaces in Zamboanga City. UNICEF has also trained 48 emergency latrine marshals in 7 evacuation centres, who will ensure that WASH facilities installed are safe and clean for users at all times.

UNICEF continues to support rapid hygiene promotion sessions in schools and community spaces, and to date, 106 hygiene promotion sessions have taken place in the affected areas, benefiting 5,800 people, including over 1,000 children. In addition, 27,000 people have benefitted from UNICEF’s distribution of hygiene kits in 12 evacuation centers in the affected areas.

Education
UNICEF has distributed 1,000 school packs to temporary learning spaces in the sports complex, 7 Early Childhood Care Development kits to day care centres benefiting 400 pre-school children and sets of library, sports and recreation materials for 1,500 school children.

UNICEF has established 20 temporary learning tents at evacuation centres in the city, benefiting over 1,000 children, and has provided psychosocial support services through a partnership with the Community and Family Services International, for over 2,000 children attending child friendly spaces in the city.
UNICEF and cluster partners held trainings on education in emergency for 90 teachers and over 200 teacher volunteers from four of the most affected schools in the city. In addition, a parental orientation to address protection issues in school evacuation centres and in temporary learning spaces was conducted in Sta. Barbara.

**Funding**

UNICEF Philippines is requesting US$5.7 million for the Zamboanga response to meet the immediate needs of children and women throughout the affected areas.

UNICEF’s total appeal to support crisis-affected children and women across the Philippines, including those impacted by Typhoon Haiyan, the Bohol Earthquake, Central Mindanao and the Zamboanga conflict is now US$144,629,816 million.

<table>
<thead>
<tr>
<th>Sector</th>
<th>Mindanao Conflict</th>
<th>Zamboanga Emergency</th>
<th>Earthquake Bohol Requirements</th>
<th>Haiyan Requirements</th>
<th>Total Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Water, Sanitation &amp; Hygiene</td>
<td>4,423,740</td>
<td>3,000,000</td>
<td>7,800,000</td>
<td>45,000,000</td>
<td>60,223,740</td>
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<tr>
<td>Child Protection</td>
<td>925,263</td>
<td>700,000</td>
<td>500,000</td>
<td>15,000,000</td>
<td>17,125,263</td>
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<tr>
<td>Nutrition</td>
<td>1,159,932</td>
<td>500,000</td>
<td>3,000,000</td>
<td>10,000,000</td>
<td>13,659,932</td>
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<tr>
<td>Health</td>
<td>110,000</td>
<td></td>
<td></td>
<td>19,000,569</td>
<td>19,110,569</td>
</tr>
<tr>
<td>Education</td>
<td>1,130,490</td>
<td>1,500,000</td>
<td>1,879,822</td>
<td>30,000,000</td>
<td>34,510,312</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td><strong>7,755,425</strong></td>
<td><strong>5,700,000</strong></td>
<td><strong>12,179,822</strong></td>
<td><strong>119,000,569</strong></td>
<td><strong>144,629,816</strong></td>
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</tbody>
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