# JOINT APPEAL & FLOOD RESPONSE PLAN TOWARDS RECOVERY

MAY - DECEMBER 2021

ISSUED MAY 2021

# **TIMOR-LESTE**





## **About**



This Flood Response Plan, composed of immediate and short-term activities, is consolidated by the UN Resident Coordinator's Office in Timor-Leste on behalf of the Government of Timor-Leste and humanitarian partners. The document outlines a strategic and coordinated response being planned by the Government and humanitarian agencies to build on the flood response efforts to date and to scale-up the joint response to meet the residual humanitarian and early recovery needs of people affected by the floods in April 2021.

The designations employed and the presentation of material in the document do not imply the expression of any opinion whatsoever on the part of the United Nations concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries.

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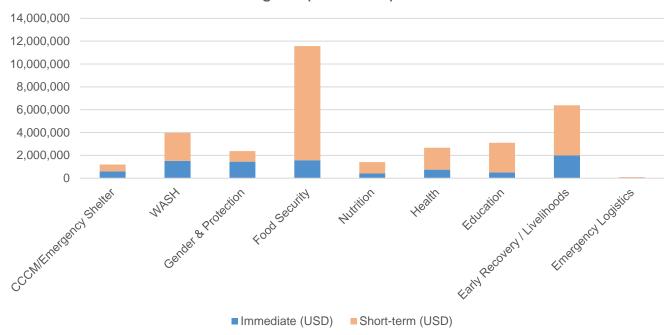
## Response Plan Overview

PEOPLE AFFECTED PEOPLE INDIRECTLY TARGETED REQUIREMENTS % % % % WOMEN CHILDREN DISABILITY 193k 65k 352.5k \$32.8M 26% 47% 15%

## **Target and Funding Requirements by Sector**

	Sector	People Targeted	Immediate (USD)	Short-term (USD)	Total (USD)
Î	CCCM/Emergency Shelter	25,000	600,000	600,000	1,200,000
-	WASH	352,553	1,520,000	2,450,000	3,970,000
4	Gender & Protection	65,000	1,443,270	925,000	2,368,270
5333	Food Security	50,000	1,575,625	10,000,000	11,575,625
Ö	Nutrition	1,500	406,000	1,000,000	1,406,000
\$	Health	192,860	755,000	1,910,000	2,665,000
	Education	51,200	500,000	2,600,000	3,100,000
	Early Recovery / Livelihoods	28,700	2,000,000	4,384,000	6,384,000
は	Emergency Logistics	n/a	40,000	60,000	100,000
	Total		8,839,895	23,929,000	32,768,895

## Funding Requirement per Sector



## **Response by Gender**

## **Response by Age Group**

GENDER	% TARGETED
Women	28%
Girls	21%
Men	28%
Boys	23%

AGE	% TARGETED
Children (0-19)	44%
Adults (20-64)	53%
Elders (65+)	3%

#### **Situation Overview**

The heavy rains across Timor-Leste from 29 March to 4 April 2021 have resulted in flash floods and landslides across all 13 municipalities in the country, with the capital Dili and surrounding low-lying areas the worst affected. A total of 44 fatalities (including 14 missing, presumed dead) have been recorded, 20 of which were recorded in Dili municipality. In recognition of the magnitude of the disaster impacts, on 8 April, the Government declared a state of calamity in Dili for a period of 30 days and called for international assistance.

According to the latest official figures (19 May), a total of 33,835 households have been affected by the floods across all 13 municipalities. Of which, 81.6% – or 27,622 households – are in Dili municipality. According to the latest figures (24 May) from the Secretariat of State for Civil Protection, there are a total of 12 evacuation centers in Dili, where 1,541 people are temporarily sheltered. In the first days after the disaster, this number was considerably higher with 15,876 people in the evacuation centers at their peak. The majority of those who were temporarily displaced have returned to their houses. However, there

continues to be residual humanitarian needs amongst the affected population.

Extensive damages were reported to houses, buildings (including health facilities and COVID-19 guarantine and isolation centers), public infrastructure and agricultural land. Government's preliminary assessment findings indicate that 33,835 houses across municipalities were destroyed or damaged. A total of 2,163 hectares of agricultural areas were affected and the irrigation system was extensively damaged, which could negatively impact food security during the next lean season (November 2021 to February 2022).

This disaster comes at a time when the country has seen a surge in COVID-19 cases in recent months, with Dili municipality in strict lockdown since 9 March. The temporary displacement of people poses a threat to further spread of COVID-19 as well as outbreaks of water-borne and vector-borne diseases, which would put a further strain on Timor-Leste's already over-stretched, fragile health system.

## Government-led response

The Government of Timor-Leste - through the Secretariat of State for Civil Protection together with other ministries - is leading the humanitarian response. The authorities quickly ramped up search, rescue and evacuation operations and provided shelter, food and emergency supplies to the flood-affected people. They also immediately began clearing debris and restoring infrastructure to re-establish road transport and to resume electricity and water supplies. The Government made an initial allocation of USD 1.5 million from the 2021 State Budget for the flood response to cover the Government response for a period of three months (April to June 2021). By 12 April, the

Secretariat of State for Civil Protection developed a Flood Response Strategy, setting priorities for weeks 1 to 3 (4-24 April) of the emergency response. To date, the Secretariat of State for Civil Protection has distributed: 317.5 MT of rice, 104 MT of other food items and over 18 MT worth of non-food items. It has reached 12,197 flood-affected households across all municipalities.

In support of Government efforts, the humanitarian partners have been responding jointly to address the lifesaving needs of the affected people, in particular the vulnerable groups including women, children and persons with disabilities (PwDs). As a part of the 2020-2021

joint UN-NGOs La Niña preparedness planning, UN agencies had pre-positioned relief supplies in the UN compound, which enabled rapid response. With the support of donors, humanitarian partners have repurposed existing resources and mobilized additional resources through corporate emergency response funds to kick-start multisectoral emergency relief efforts, primarily in Dili, to augment the Government response.

The Secretariat of State for Civil Protection and the Ministry of State Administration - supported by humanitarian partners – conducted a rapid needs assessment immediately following the disaster. The Humanitarian Partners Group – composed of UN agencies, international and national NGOs, Red Cross and Red Crescent Movement and donor representatives – also supported respective line ministries with sector-specific assessments such as in health, nutrition, and education sectors in the first weeks of disaster onset. A joint UN team also conducted rapid site assessment (Displacement Tracking Matrix (DTM)) on 5 and 6 April to identify priority needs in evacuation centers in Dili.

Less than one week into the response, the Government and the humanitarian partners began to reach the flood-affected communities marooned in Tasi Tolu, a protected area 8 kilometers west of Dili, with life-saving assistance, including access to safe water and provision of food and non-food items. The humanitarian partners also started to support flood-affected households in municipalities outside of Dili. The Secretariat of State for Civil Protection further launched three needs assessments on 13 April, supported by UN agencies and NGOs, to assess (1)

needs in evacuation facilities to prepare for the return process, (2) multi-sectoral damage and needs at the village level, and (3) damage and needs at the household level.

On 23 April, the National Parliament approved the amendment to the 2021 General State Budget to respond to the impact of COVID-19 and the flooding, which was subsequently promulgated by the President on 4 May. The allocation to the COVID-19 Fund increased from USD 31 million to USD 287.6 million, while **the Contingency Fund allocation increased from USD 23.8 million to USD 65.2 million**. The allocation from the Contingency Fund will be utilized for infrastructure recovery in flood-affected communities.

During the Emergency Development Partners' Meeting called by the Government on 13 April, the Government and the humanitarian partners agreed on the need for a strongly coordinated floods response, under the leadership of the Government. The 2021 Timor-Leste Flood Response Plan, therefore, is positioned as a tool to facilitate a continued coordinated flood response by the Government and the humanitarian partners (incl. donors), focusing on the coming 7 months (end May - end December) to address the residual humanitarian and early recovery needs of the most vulnerable, affected people. Once the findings of a more comprehensive assessment of damages and losses become available, the Government and partners may consider developing a medium-term recovery plan in line with the Government's commitment to Build Back Better.

## **Timeline of Key Events**

#### 29 March to 4 April

 Heavy rains, culminating in massive flooding of Dili municipality and other municipalities on 4 April



#### 4 April

 Government and humanitarian partners start emergency response



#### 5 April

 UN – led by IOM – conducts first rapid site assessment (DTM) of 10 evacuation facilities to identify priority needs



#### 13 April

 Government organizes the Emergency Development Partners Meeting



#### 9 April

• UN Resident Coordinator organizes the first meeting of humanitarian partners



#### 8 April

 Government declaration of state of calamity in Dili for a period of 30 days and call for international assistance



#### 13 April

 Government and humanitarian partners start rapid needs assessments (in evacuation facilities, at household-level and at sucolevel)



#### 4 May

 President promulgated the amendment to the 2021 General State Budget to respond to the impact of COVID-19 and the flooding



#### 1 June

 Joint Appeal/Response Plan launched

## Strategic Objectives and Guiding Principles

The four Strategic Objectives of the 2021 Timor-Leste Flood Response Plan are as follows:

#### Strategic Objective 1

To address the residual humanitarian needs of the flood-affected people through provision of essential items and undisrupted delivery of essential services (including health, nutrition, WASH, education, and protection services).

#### **Strategic Objective 3**

To support the affected population to rebuild their lives and livelihoods in a safe and sustainable manner.

Amongst the flood-affected population, it is estimated that 25.9% are women (20-64 years), 21.1% are girls (0-19 years), 26.7% are men (20-64 years), 22.8% are boys (0-19 years), 1.8% are elderly women and 1.7% are elderly men (65+ years) (see Diagram 1). It is estimated that 15% of affected people are PwDs.

The Plan aims to directly target the residual humanitarian and early recovery needs of approximately 65,000 flood-affected people living with existing vulnerabilities that require urgent assistance<sup>1</sup>. All flood-affected population will benefit indirectly from the response, including through rehabilitation of critical public infrastructures and restoration of essential services.

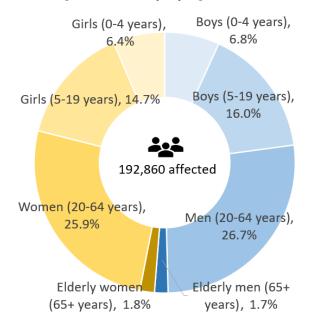
#### Strategic Objective 2

To protect the most vulnerable groups (including women, children, persons with disabilities and the elderly) from the negative impacts of the disaster, including ensuring access to assistance and protection from violence.

#### Strategic Objective 4

To support the rehabilitation of critical public infrastructure to restore public services.

Diagram 1: Total number of people affected by flooding in the country, by age and sex



<sup>&</sup>lt;sup>1</sup> In total, 33,835 households were affected. Based on the Census 2015 and projections for 2021, it is estimated that in

total, ca 192,860 people were affected by the flooding (ca 135,348 in Dili and 57,512 in other municipalities).

In line with the Secretariat of State for Civil Protection's Flood Response Strategy, the Plan will prioritize to address the residual humanitarian needs of those who remain in the evacuation centers two months on, as well as support to the safe return and early recovery of those who were temporarily displaced and since returned to their communities.

The Plan has been developed by the Government and humanitarian partners based on preliminary findings of needs assessments, estimates of people in need, pre-disaster action planning for a possible flooding triggered by La Niña, and consultations with stakeholders.

The implementation of the 2021 Timor-Leste Flood Response Plan will be guided by the following overarching principles:

- Humanitarian Principles Humanity, Neutrality, Impartiality, and Independence, with respect for Do No Harm principle of humanitarian assistance
- 2. **Government leadership and ownership** of the flood response, with coordinated support from humanitarian partners
- 3. Flood response to **strengthen local capacities**, not undermine them
- Participation and inclusion of women, people with disabilities and other vulnerable and marginalized groups in the planning, implementation, and monitoring of the response
- 5. **COVID-19 safe** floods response that prevents further spread of COVID-19
- Zero-tolerance to sexual exploitation and abuse as stipulated in the <u>Secretary-General's Bulletin</u> ST/SGB/2003/13

### **Humanitarian Principles**

Humanity	Neutrality	Impartiality	Independence
Human suffering must be addressed wherever it is found. The purpose of humanitarian action is to protect life and health and ensure respect for human beings.	Humanitarian actors must not take sides in hostilities or engage in controversies of a political, racial, religious or ideological nature.	Humanitarian action must be carried out on the basis of need alone, giving priority to the most urgent cases of distress and making no distinctions on the basis of nationality, race, gender, religious belief, class or political opinions.	Humanitarian action must be autonomous from the political, economic, military or other objectives that any actor may hold with regard to areas where humanitarian action is being implemented.

#### **Priorities and Needs**

The disaster has impacted Timor-Leste at the individual, household, and community-levels.

At the **individual-level**, individuals have suffered injuries, loss of lives, and temporary separation. The flooding exacerbates existing vulnerabilities of children, women, the elderly, Lesbian, Bisexual, Gay, Transgender, Intersex (LGBTI) community, and people with disabilities (PwDs) leading to protection concerns, including child protection and sexual and gender-based violence (SGBV).

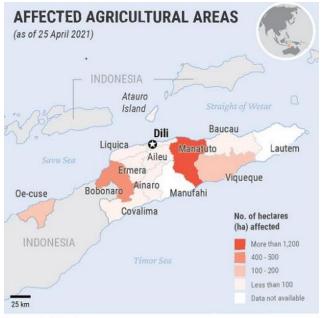
At the **household level**, the flooding resulted in damages to houses, shelters, family properties and in loss of assets such as essential goods, electronic equipment, and vehicles. Flooding has also negatively impacted the livelihoods of households, including through damages to crops and livestock. Responsibilities for caregiving have shifted within the households to children, and there may be further shifting of responsibilities within the households for income generation and livelihood to children, as families struggle to recover.



Seurce: Gov't. of Timor-Leste
The boundaries and names shown and the designations used on this map do not imply official endorsement
or acceptance by the United Nations. Map created by UNOCHA

At the **community-level**, public infrastructure, including bridges and roads, were damaged; coupled with landslides and fallen trees, access to some flooded areas are severely restricted and essential services disrupted. Public services, including several health and education facilities, have been affected and disrupted by flooding, a cause of concern for potential deterioration in public health amidst the current surge in COVID-19 cases, and for continuation of education and other social services.

The flooding also impacted **agricultural land** ahead of the harvest season, in a country where agriculture constitutes 70% of the population's main source of livelihood. Reduced yield, loss of crops and loss of seeds and agricultural tools are major concerns for protracted food insecurity. The floods may also increase prevalence of diseases affecting livestock, which is a main livelihood asset in rural communities.



Source: Gov\*t. of Timor-Leste
The boundaries and names shown and the designations used on this map do not imply official endorsement
or acceptance by the United Nations. Map created by UNIOCHA.

#### **Residual Humanitarian Needs**

The residual humanitarian needs include:

- 1. Emergency health needs of those injured
- 2. Health needs of those with pre-existing conditions and pregnant and lactating women
- 3. Psychosocial needs, including of children
- 4. Prevention of disease outbreaks, and of further spread of COVID-19
- 5. Safe water, temporary latrines, hygiene/dignity kits and materials for cleaning up
- 6. Food (including MREs, high-energy and supplementary foods), cooking materials and cooking stoves/firewood
- 7. Temporary shelter and/or shelter materials
- 8. Management of remaining evacuation centers, including protection and prevention of SGBV

#### **Early Recovery Needs**

The heavy rains, as they hit during the peak harvest season for maize and rice, will negatively impact the agricultural harvest.

For transition to recovery of the affected communities, the early recovery needs of the affected people will need to be frontloaded, including:

- 1. Agricultural livelihood needs, such as seeds, agricultural inputs, fertilizers and agricultural tools
- 2. Non-agricultural livelihood needs
- 3. Renovation of community assets, such as embankment, market facilities, and irrigation infrastructure
- 4. Renovation of health and education facilities
- 5. Reconstruction of damaged shelters

## **Operational Constraints**

The strict lockdown due to COVID-19 in Dili municipality was temporarily suspended on 9 April to allow for emergency response. The 13th State of Emergency was then declared, applicable from 3 May, and the general home confinement in Dili municipality has been reinstated until 27 May. The sanitary fence around Dili municipality, as well as around municipalities of Baucau and Covalima are to remain until 30 May. As of 24 May, there are 2,601 active cases of COVID-19, including amongst the temporarily displaced. The risk of further spread of COVID-19 remains high. Under the national COVID-19 vaccination programme launched on 7 April – as of 24 May a total of 65,849 essential workers at the frontline of the COVID-19 response - many of whom are also at the frontline of the flood response – and other priority groups have received their first dose of COVID-19 vaccination across all municipalities.

In addition to COVID-19 prevention and response measures, humanitarian partners note the lack of gender, age and vulnerability disaggregated data as a challenge in response planning. WASH and Nutrition Sectors also report that supplies are limited in the local market and those that are available are at high cost. As the initial response focused on the most severely affected municipality of Dili, residual humanitarian needs in the other municipalities may be further revealed in future assessments.

## Coordination

The day-to-day operational coordination of the flood response is led by the Secretariat of State for Civil Protection while the international assistance to the flood response is jointly coordinated by the Ministry of Finance and the Ministry of Foreign Affairs and Cooperation. The UN – with three staff from IOM, UN Resident Coordinator's Office and WFP – and Australian Humanitarian Partnership partners and Mercy Corps are supporting the operational coordination role of the Secretariat of State for Civil Protection.

The UN Resident Coordinator is providing strategic coordination of the international humanitarian response to the floods, as well as

high-level engagement with the Government leadership, diplomatic community including humanitarian donors, civil society and the media. The Government, UN Resident Coordinator and the Humanitarian Partners Group will continue to oversee the implementation of the activities outlined in the The Government and humanitarian partners are organized in nine sectors, most of which led by the Government line ministries and co-led by UN agencies and NGOs. The UN Resident Coordinator's Office. Australian Humanitarian Partnership partners and Mercy Corps are iointly supporting inter-sector coordination.

## Accountability

The humanitarian partners are accountable to the people and the Government of Timor-Leste for the flood response activities implemented as a part of the Flood Response Plan or outside of the Plan.

The implementation of the Plan will be regularly monitored by the Secretariat of Civil Protection and the UN Resident Coordinator's Office, and by the Sector Leads/Co-Leads at the sector-level.

Regular reporting on the of progress implementation against the Plan will be done through the monthly Situation Reports (SitReps). The SitReps will include: consolidated up-to-date information on the funding overview (through the Financial Tracking Matrix); and progress of activities outlined in the Plan including information on who is doing what, where and for whom (4W). The SitReps are public documents that will be circulated to all humanitarian partners and beyond, to ensure transparency and accountability.

## **Sectoral Objectives and Response**



Photo Credit: UNICEF Timor-Leste

## **CCCM / Emergency Shelter**



PEOPLE TARGETED	TOTAL (USD)	IMMEDIATE (USD)	SHORT-TERM (USD)
25k	\$1.2M	\$ 0.6M	\$ 0.6M

Sector Leads & Members: Secretariat of State for Civil Protection, Ministry of Social Solidarity & Inclusion (MSSI), National Police of Timor-Leste (PNTL), F-FDTL, IOM, UNFPA, UNICEF, Oxfam, CARE, Caritas, Catholic Relief Services, Cruz Vermelha (CVTL), Mercy Corps, Plan International, The Asia Foundation, Timor-Leste Red Cross Society (IFRC), World Vision

#### **Sector Overview and Priority Needs**

Of the 192,860 people affected by the floods and landslides, more than 20,000 were forced to leave their homes and seek shelter in temporary evacuation centers erected across Dili and in other municipalities. While most families have returned to their homes, 1,541 people (354 households) still reside in evacuation centers two months after the disaster and continue to rely on humanitarian assistance.

As the response moves into the early recovery phase, there is a need to support families to return home, consolidate evacuation centers and relocate people that are living in areas at high-risk of disasters such as flooding and landslides. There will likely be residual numbers of displaced people who cannot return home – approximately 1,541 people – that will require ongoing support in evacuation centers or transitional shelter. The majority of affected people will need support in return and recovery.

#### **Sector Objectives**

- 1. To provide decent, adequate, and dignified shelter to vulnerable households affected by floods, whose houses have been destroyed or partially damaged.
- 2. To safeguard the health, security, privacy and dignity women and men, boys and girls affected by floods through the provision of emergency shelter and NFI assistance.
- 3. To address displacement needs and provide solutions to diminish risk of protracted displacement.
- 4. To promote early self-recovery through a participatory neighborhood/settlements approach that integrates shelter, WASH, health, livelihood and protection needs.

#### **People Targeted**

**Initial Phase (Month 1):** 25,000 people temporary displaced in the immediate aftermath of the floods, taking shelter in public buildings and community centers in Dili temporarily serving as evacuation centers or with host families.

#### Early Recovery Phase (Month 2 to 7):

**Target 1 (CCCM):** 3,000 people whose houses have been badly damaged or destroyed and remain displaced requiring ongoing assistance, care and maintenance, and solutions.

**Target 2 (Shelter):** 22,000 people with damaged or destroyed homes who are returning home and require support to self-recover.

Different interventions will be required depending on displacement and the type of damage: urban, rural, displaced, non-displaced and the specific context:

- 1. People living in evacuation centers or with host families
- 2. People returning to lightly damaged houses
- 3. People returning to houses that have been severely damaged
- 4. People who cannot return to their homes, due to damage/destruction or deemed unsafe for future disasters.

#### **Priority Needs**

- Non-Food Item (NFI) Kits
- Emergency Shelter Kits (tarps and ropes)
- Housing recovery toolkits (including for cleaning, either in-kind or as cash/voucher)
- Site upgrades

#### **Priority Response Activities**

The CCCM/Emergency Shelter sector partners aim to use a combined approach in the delivery of assistance to the targeted population:

#### In evacuation centers:

- Provide emergency shelter items and NFIs to displaced households residing in evacuation centers in Dili, coordinated through the Civil Protection. In the rural municipalities, local authorities will continue to coordinate the response with partners through the Disaster Management Committees.
   To the extent possible and appropriate, the kits will be provided to households departing the evacuation centers to encourage re-integration in communities.
- Identify suitable sites to shelter people displaced for the medium and longer term, ensuring that the necessary protection and COVID-19 safety measures are considered.
- While efforts are made to re-integrate the affected households in the local communities, partners
  will provide material and technical support to consolidate and, if necessary, establish temporary
  shelter solutions for people whose houses have been completely destroyed, or who reside in areas
  considered unsafe for return.
- Establish committees for ongoing care and maintenance of sites, displaced population governance, and solutions discussions.

• Coordinate with other sectors to ensure timely delivery of assistance and services in the evacuation centers, and upgrade evacuation center infrastructure for prolonged stays.

#### In return locations:

- Support people to repair their damaged houses through provision of shelter kits (tools and materials).
- Provide NFI kits in accordance with Sector and Civil Protection guidance to replace lost and damaged household goods.
- Support and provide hands-on training on building back safer construction with the tool and materials kits provided.
- In close coordination with the Livelihoods and Early Recovery sector, support in the provision of cash-based assistance to support people's recovery.
- Continue to promote community-based hazard awareness, preparedness and Disaster Risk Reduction (DRR) throughout the response and support links to community-based planning and development work.

#### **Continued monitoring:**

- Conduct multi-sectoral assessment and household assessment, and the Post-Disaster Needs
  Assessment (PDNA) and the Household and Building Damage Assessment (HBDA), to inform the
  short, medium and longer-term shelter needs and to help inform efforts to resettle people to
  disaster-safe areas.
- Conduct regular real-time monitoring of evacuation centers, consolidations of evacuation centers, including maps, locations, demographics, needs and intentions of displaced persons.
- Conduct regular real-time monitoring of recovery process, households covered, needs and gaps at suco level.

#### Approaches:

- Prioritization of vulnerable groups, including displaced women and men, boys and girls, persons with disabilities and families in need of support in rebuilding their homes.
- Activities closely coordinated with Food Security, WASH, Gender & Protection, and Livelihoods/Early Recovery Sectors.
- Particular attention to protection issues, particularly GBV, inclusive distributions, gender-sensitive evacuation center management and recovery process.
- Ensure that any measures and actions follow COVID-19 protocol.
- The sector will provide advice to the Government's reconstruction and resettlement efforts to households with damaged or destroyed houses.

## **Detailed list of activities and corresponding budget**

Activities	Implementing partners	Immediate or Short- term	Funding Gap (USD)
Provide emergency shelter items and NFIs to displaced households residing in evacuation centers in Dili	Civil Protection and Sector Partners	Immediate	100,000
Provide NFI kits in accordance with Sector and Civil Protection guidance to replace lost and damaged household goods.	Civil Protection and Sector Partners	Immediate	300,000
Conduct regular real-time monitoring of evacuation centers and sucos, including maps, locations, demographics, needs and intentions of displaced persons.	Civil Protection, AHP, CVTL and IOM	Immediate	50,000
Support people to repair their damaged houses through provision of shelter kits (tools and materials or through	Civil Protection and Sector	Immediate	150,000
cash).	Partners	Short-term	250,000
Provide material and technical support for the consolidated temporary shelter solution for people whose houses have been completely destroyed, or who reside in areas considered unsafe for return.	Civil Protection and Sector Partners	Short-term	100,000
Support and provide hands-on training on building back safer construction with the tool and materials kits provided.	Civil Protection, AHP, CVTL and IOM	Short-term	100,000
In close coordination with the Livelihoods and Early Recovery sector, support in the provision of cash-based assistance to support people's recovery.	Civil Protection and Sector Partners	Short-term	100,000
Continue to promote community-based hazard awareness, preparedness and Disaster Risk Reduction (DRR) throughout the response and support links to community-based planning and development work.	Civil Protection, AHP, CVTL and IOM	Short-term	50,000
Total			1,200,000

## Water, Hygiene and Sanitation



PEOPLE TARGETED	TOTAL (USD)	) IMMEDIATE (USD)	SHORT-TERM (USD)
I LOI LL I ANGLI LD	I O I AL (OUD		SHOKI ILKW (OSD)

352.5k \$3.97M \$1.52M \$2.45M

Sector Leads & Members: Secretariat of State for Civil Protection, Ministry of Public Works (MOP), BEE Timor-Leste (BTL), Ministry of State Administration, Ministry of Health (MoH), Dili Municipality, UNICEF, UNDP, WFP, WHO, Partisipa, Plan International, Adventist Development & Relief Agency (ADRA), Cruz Vermelha Timor-Leste (CVTL), Engineers Without Borders (EWB), Fundasaun Hafoun Timor-Leste (FHTL), Japan International Cooperation Agency (JICA), Mercy Corps, WaterAid

#### **Sector Overview and Priority Needs**

WASH sector partners provided emergency WASH services and increased access to water and sanitation of flood-affected people, through the installation of water tanks, handwashing stations, mobile toilets and rehabilitation of WASH facilities in the evacuation centers and in public areas. With WASH sector partners' support, the evacuation centers and affected communities are being provided with access to clean water (such as refilling installed water tanks, re-establishment of water supply systems to affected communities, etc.).

#### **Priority Needs**

- Immediate supply of potable water (trucking or temporary pipelines)
- Supplies for water storage (tanks, jerry cans)
- Onsite water treatment solutions and knowledge
- Undisrupted access to routine WASH services
- Temporary toilets
- Human waste management
- Solid waste management commodities and knowledge
- Supply of personal hygiene kits (including soap and sanitary pads)
- Supply of environmental cleaning kits
- Emergency hygiene promotion
- Strengthened sectoral coordination and information sharing
- Mobilization of additional resources to support WASH sector response in municipalities outside of Dili

## **Priority Response Activities**

#### **Residual Humanitarian Response**

- Distribution of life saving supplies and services (both to evacuation facilities and to affected households)
- Construction of interim water and sanitation infrastructure
- Hygiene promotion
- Water treatment and safe water storage mechanisms

#### **Transition to Recovery**

- Prevent potential water-borne disease outbreaks in the affected communities through community
  mobilization for WASH behavioral change communication, as well as the provision of soap, hand
  sanitizers and infection prevention and control supplies.
- Improve WASH services in affected schools, health centers, through the improvement of drinking water safety and quality, rehabilitation of water supply facilities, water storage, gender-sensitive sanitation facilities and provision of handwashing stations with soaps.
- Improve and upgrade WASH facilities in schools and health stations to address urgent needs, particularly for children.
- Promote fecal waste management and provide guidance on improving latrines after the flooding.
- Improve the operation and maintenance of water schemes for sustainable water supply, including repair and rehabilitation of water supply systems and networks, in areas most affected, also focusing on local health centers and school facilities.
- Promote community engagement and hygiene practices based on deeper contextual
  understanding of the social and cultural norms, to determine the public health risks, design and
  communicate Information, Education and Communication (IEC) materials, track disease trends
  related to disasters; apply COVID-19 preventive methods (e.g. handwashing, maintaining a safe
  distance and face mask-wearing).

## **Humanitarian-Development Nexus**

- Incorporating WASH emergency coordination under national WASH coordination
- Risk-informed regular WASH programing (resilient infrastructure designs etc)
- Inclusive WASH designs and mainstreaming WASH designs for those with special needs
- Building capacity of WASH service providers on vulnerabilities and response
- Community based behavior change programs targeting weak or negative social norms
- Essential WASH and emergency knowledge in school curricula or as co-curricula activities

## **Detailed list of activities and corresponding budget**

 Activities	Implementing Partners	Immediate or Short- term	Funding Gap (USD)
Distribution of life saving supplies and services (both to evacuation facilities and to affected households)	Civil Protection and Sector Partners	Immediate	500,000
Construction of interim sanitation infrastructure	Civil Protection and Sector Partners	Immediate	350,000
Hygiene promotion	MoH and Sector Partners	Immediate	70,000
Water treatment and safe water storage mechanisms	MoPW-BEE TL and Sector Partners	Immediate	600,000
Prevent potential water-borne disease outbreaks in the affected communities through community mobilization for WASH behavioral change communication, as well as the provision of soap, hand sanitizers and infection prevention and control supplies.	MoH and Sector Partners	Short-term	50,000
Improve WASH services in affected health centers, through the improvement of drinking water safety and quality, rehabilitation of water supply facilities, water storage, gender-sensitive sanitation facilities and provision of handwashing stations with soaps.	MoE, MoH, MoPW – BEE TL and Sector Partners	Short-term	600,000
Improve and upgrade WASH facilities in health stations to address urgent needs, particularly for children.	MoE, MoH, MoPW – BEE TL and Sector Partners	Short-term	1,000,000
Promote fecal waste management and provide guidance on improving latrines after the flooding.	MoPW-BEE TL and Sector Partners	Short-term	700,000
Promote community engagement and hygiene practices based on deeper contextual understanding of the social and cultural norms, to determine the public health risks, design and communicate Information, Education and Communication (IEC) materials, track disease trends related to disasters; apply COVID-19 preventive methods (e.g. handwashing, maintaining a safe distance and face mask-wearing.)	MoH and Sector Partners	Short-term	100,000
Total			3,970,000

## **Gender and Protection**



PEOPLE TARGETED TOTAL (USD) IMMEDIATE (USD) SHORT-TERM (USD)

65k \$ 2.37M \$ 1.44M \$ 0.93M

Sector Leads & Members: Ministry of Social Solidarity and Inclusion (MSSI), Secretary State for the Promotion of Equality and Inclusion (SEII), National Directorate for Community Conflict Prevention (DNPCC), National Police of Timor-Leste (PNTL), UN Women, UNICEF, IOM, UNFPA, UNDP, UNESCO, The Asia Foundation (Nabilan), Alola Foundation, Alumni of Youth Parliament, Arcoiris, Asisténsia Legál ba Feto no Labarik (ALFeLa), Associacao Deficientes de Timor-Leste (ADTL), Ba Futuru, Blank Angels, CARE International, Child Fund, Commission on the Rights of the Child, FOKUPERS, Fundacao Oriente, Maluk Timor, Mercy Corps, Health Alliance International, , Oxfam, Plan International, PRADET, Programa Monitorizasaun Sistema Judisiál (JSMP), Rede Feto, Scouts, Timor-Leste Police Development Programme (TLPDP), World Vision

#### **Sector Objective**

• 65,000 most vulnerable people (women, girls and vulnerable survivors of violence, people with mental and/or physical disabilities, pregnant mothers, elderly, women and children living in shelters/institutional facilities, LGBTQI persons and persons with HIV/AIDS and their families) have access to nutritious food; and, women and girls have access to dignity kits and information around their rights to live safely, to be protected from violence and access to services as well as other protection essential items such as clothing and lights<sup>2</sup>

## **Sector Overview and Priority Needs**

The flooding adversely affects women, men, girls and boys of all ages in diverse ways. In particular, groups such as women, children, PwDs, the elderly and other vulnerable groups experience an exacerbated impact due to existing vulnerabilities such as gender inequality, high prevalence of violence against women and children, and stigmas towards certain vulnerable groups.

It is estimated that of the people affected by the flooding, 48.7% are female, 21.1% are children (aged 0-19), 13.5% are elderly (65+) and 15% are PwDs. It is likely that of the affected female population (aged 15-49), 2 out of 3 women are survivors of violence.

<sup>&</sup>lt;sup>2</sup> The response aims to ensure that 3,000 children in evacuation centers, institutional care facilities and most affected communities have access to Mental Health and Psychosocial Support; 3,000 vulnerable parents and caregivers in evacuation centers, and affected communities have access to mental health and psychosocial (including 100 parents or caregivers of children with disabilities continue to receive psychosocial support).

During the first months of the emergency, the Gender & Protection Sector, with its two sub-sectors GBV and Child Protection, led by MSSI, SEII and Civil Protection with technical assistance from UN Women, UNICEF and UNFPA, has been providing life-saving and coordinated response delivered in a safe and dignified manner. In response to the floods, for example, the EU-UN Spotlight Initiative reprogrammed to reach 4,000 women, girls, and other vulnerable people who were temporarily displaced. The redirected funding is used to disseminate information on the prevention of GBV and referral systems, provide psychosocial support, basic food and non-food items to women, girls, and vulnerable survivors of GBV, conduct monitoring and evaluation, and strengthen the GBV emergency response in the revised National Action Plan on Gender-Based Violence (NAP GBV). Moreover, UNICEF and MSSI in collaboration with the Commission on the Rights of the Child, 10 Local and International NGOs and 3 youth groups established 13 Child Friendly Spaces for Psychosocial Intervention in 13 Evacuation centers reaching over 1000 children and their parents.

The sector however faced challenges due to the limited services and resources available to respond to the magnitude of damage from the flooding in the context of the COVID-19 pandemic. The sectoral objectives are to assist Government to: (1) support timely and effective delivery of protection interventions to prevent and respond to violence, abuse, neglect and exploitation against women, children and vulnerable groups in a way that promotes resilience; (2) strengthen the resilience of social welfare service providers, caregivers, children and adolescents and vulnerable groups; and (3) provide food and NFI to the vulnerable groups to help protect them from further harm.

#### **Priority Needs**

- Support Government to strengthen disaggregated data gathering, analysis and sharing to inform the response. Ensure data meets the unique needs of women, girls, men, boys and marginalized groups
- Support the Government ministries as sectoral leads to coordinate with other sectors and community-based structures to address protection concerns and respond to meet the needs of vulnerable people in a way that enhances communities' existing capacities and resilience, as well as to strengthen the future emergency preparedness plans.
- Ensure that the most vulnerable people are prioritized to receive basic life-saving support across all sectors safely and with dignity that meets the vulnerable people's unique needs<sup>3</sup>.
- Strengthen existing social services, including the child and welfare system to raise awareness around the rights of vulnerable people, disseminate information around service providers' referral mechanism, deliver services to promote wellbeing, and prevent all forms of violence.
- Support law enforcement such as the Vulnerable Person Unit (VPU) from the National Police to assist women and child survivors of violence, as well as children in conflict with the law, and link them with legal assistance services<sup>4</sup>.

<sup>3</sup> This includes assessment and provision of needs (food, shelter, education and water, sanitation, and hygiene), referring concerns, and raising awareness among communities and service providers to avoid unnecessary separation of children and prevent violence, abuse, neglect, and exploitation.

<sup>&</sup>lt;sup>4</sup> This includes raising awareness on child protection and prevention of sexual exploitation and abuse in evacuation centers and in affected areas.

- Develop and strengthen mental health and psychosocial support referral pathways and mental health hotlines. Ensure that available services are accessible to women, children and vulnerable groups experiencing violence, trauma, or mental health.
- Advocate and provide support in the evacuation centers for the relocation of children, families and
  vulnerable groups who are unable to return to their houses to other places or temporary shelters.
  The evacuation centers need to be safe for women, children and vulnerable groups including in
  terms of safety, lighting and privacy for toilets and shower, and sleeping arrangements. Women
  and children's voices must be heard and included in the planning and response.
- Assist in family reunion of unaccompanied children through registration, family reunification or access to appropriate alternative care, and support bereaved widows and children to access services.
- Provide maternity healthcare and registration of newborn children, also ensuring that adolescent mothers receive support tailored to their age.

#### **Priority Response Activities**

#### **Residual Humanitarian Response**

- Support analysis of gender-sensitive and inclusive sectoral assessment data, ensuring specific data on sex, age, disability, and people with special needs is extracted and analyzed to support respective response for immediate and recovery phase.
- Support government ministries such as MSSI, SEII, Civil Protection to strengthen coordination
  mechanisms within and between sectors to ensure that the responses are complimentarily
  meeting the needs of the most vulnerable groups.
- Advocate and ensure that the needs of vulnerable and marginalized groups are included in the
  relief supplies distribution and cash transfer programme; representation of women, children and
  vulnerable groups in Response Task Forces and in the design, implementation and monitoring of
  the response; distribution of basic needs and essential services are done as per consultation with
  the vulnerable groups to prevent violence, abuse, neglect and exploitation.
- Provide food items and essential non-food items (NFI) to women, children and vulnerable groups (including maternity and household kits, improvement of lighting in evacuation areas and toilets, a personal torch to be used at times of power cuts, hand sanitizer and face masks to protect them from COVID-19).
- Provide dignity kits to women and girls in COVID-19 isolation facilities<sup>5</sup>.
- Provide psychosocial support programme, combined with distribution of dignity kits for women and COVID-19 protection kits to women and children.

<sup>&</sup>lt;sup>5</sup> To date, UNFPA distributed reached 2,440 women with dignity kits from evacuation centers and government institutions including MoH, Civil Protection and SYSS.

- Ensure women and children access essential GBV and Child Protection prevention and response services through referral networks and services. Enhance coordination of the Social Welfare and Legal Services provisions and community-based approaches<sup>6</sup>.
- Strengthen Specialized Mental Health and Psychosocial Support referral pathways for women, children, and vulnerable groups survivors and other vulnerable groups. Strengthen the ongoing support to the Mental Health Hotline. Support parents' mental health through parent safe spaces<sup>7</sup>.
   Provide specialized support to bereaved widows, children and community members, through case management, counselling, and access to services.
- Raise awareness around vulnerable groups' rights to live safely and protected, enhance family support, including information dissemination sessions by police (support police with key messages and guidance on child friendly interviews.)
- Implement community-based mental health and psychosocial support that offers children and adolescents free and structured play, recreation, and leisure activities packaged to support children's mental health through Child-Friendly Spaces (CFS) in affected communities<sup>8</sup>.
- Establish safe spaces for women and children, to ensure protection and psychosocial support services are accessible and ongoing.
- Build adolescent capacity to manage risks, protect themselves from violence through life-skills based education (LSBE)<sup>9</sup>.
- Develop and distribute parenting key messages, child protection and prevention of sexual exploitation and abuse during aid provisions and training aid workers around child protection and Protection from Sexual Exploitation and Abuse (PSEA)<sup>10</sup>.

#### **Transition to Recovery**

- Ensure integration and mainstreaming of gender and protection principles across the response through the provision of technical support to different sectors. Contextualize the Child Protection Minimum Standard in Humanitarian Settings in Timor-Leste with the support of IASC train sector members to implement the standards in times of emergency.
- Develop and distribute awareness raising materials, parenting key messages, child protection and prevention of sexual exploitation and abuse during aid provisions and training aid worker around child protection and Protection from Sexual Exploitation and Abuse (PSEA).
- Provide technical assistance and training on Psychological First Aid and the MHPSS tool kit to caregivers of residential care facilities, child protection officers, social animators, GBV focal

<sup>&</sup>lt;sup>6</sup> This is a support to MSSI Child Protection and GBV Focal Points to coordinate services and VPU to provide child friendly services and dissemination of information

<sup>&</sup>lt;sup>7</sup> Providing positive stress coping mechanisms and parenting skills to help children

<sup>&</sup>lt;sup>8</sup> Recent services reached over 1,000 children (implemented by UNICEF and ten other NGOs and youth organization). The Asia Foundation and Maluk Timor also developed MHPS activities in the camps. Parents of children attending CFS psychosocial activities reported that children sleep well, no longer wake up at night screaming after they attended the activities.

<sup>&</sup>lt;sup>9</sup> Recent activities reached about 200 adolescents in 10 evacuation centers.

<sup>&</sup>lt;sup>10</sup>). This includes safe spaces for women and adolescents to talk about their rights to live safe, having reporting mechanisms in place and access to services, as well as counselling. Currently MSSI-UNICEF, UNFPA-NGO partners, and The Asia Foundation and partners are implementing this in some of the evacuation centers.

- points, teachers, community nurses or workers and services providers<sup>11</sup>. Continue provision of mental health and psycho-social support children and parents in the affected communities.
- Review and revise case management policy for child protection in emergency and support to case management process to the survivors of violence against women and child GBV survivors, including home visits and virtual follow up support<sup>12</sup>.
- Integrate emergency response and coordination in Social Welfare Workforce Capacity development including developing an accredited community based MHPSS Social Welfare Workforce training programme.
- Ensure registration of all children in Institutional Care Facilities to identify children separated from families due to the emergency and provide the support that promotes their development, increased family connection, reintegration and wellbeing in the family.
- Improve WASH facilities in child residential facilities, ensuring they are disability friendly
- Improve baseline data and data collection to inform programming and coordination, including mapping of services and information management system.

#### **Humanitarian-Development Nexus**

- Ensuring the participation and engagement of women and girls as well as vulnerable groups in the
  design, implementation, and monitoring of livelihood recovery programme, taking their respective
  needs and capacities into account.
- Regular monitoring of the impact of the emergency response (e.g. cash transfer or food assistance programmes), paying special attention to social and gender sensitivity, e.g. imbalance of household decision-making power, intra-household dynamics and household allocation of resources (woman headed household, child headed households, and members of the LGBTQI community).

## **Detailed list of activities and corresponding budget**

Funding Gap Immediate or Short-**Activities Implementing** partners (USD) term Ensure children and women access essential GBV UNICEF-MSSI-VPU Immediate 30,000 and Child Protection prevention and response services through a strengthened GBV and child protection referral networks, services and coordination of the available Social Welfare and Legal Services provisions as well as communitybased approaches; raise awareness around vulnerable groups' rights to live safely and

<sup>11</sup> This supports children under their care, children who seek support at times of distress, survivors of violence and/or also trains parents and caregivers to support children.

<sup>12</sup> Support to MSSI Child Protection Officers, GBV Focal Points, and Social Technical staff at Administrative Post level to work with families and services.

protected, enhance family support, including information dissemination sessions by police <sup>13</sup>	UNIOFE MOST		40.00-
Advocate and ensure that the needs of vulnerable and marginalized groups are included in the relief supplies distribution and cash transfer programme; representation of women, children and vulnerable groups in Response Task Forces and in the design, implementation and monitoring of the response; distribution of basic needs and essential services are done as per consultation with the vulnerable groups to prevent violence, abuse, neglect and exploitation	UNICEF-MSSI- NGOs	Immediate	10,000
Provide dignity kit to women and girls in COVID-19 isolation facilities	UNFPA	Immediate	15,000
Implement community-based mental health and psychosocial support that offers children and adolescents free and structured play, recreation, and leisure activities packaged to support children's mental health through Child-Friendly Spaces (CFS) in affected communities	UNICEF-MSSI- NGOs	Immediate	30,000
Strengthen Specialized Mental Health and Psychosocial Support referral pathways for women, children, and survivors of violence and trauma, including families and other vulnerable groups in affected areas	UNICEF-MSSI- MoH-WHO	Immediate	10,000
Support parents' mental health through parent safe space, supporting parents to learn positive stress coping mechanisms and parenting skills to help their children	UNICEF-MSSI-Ba Futuro	Immediate	20,000
Provide Psychosocial Support Programme with distribution of dignity kits for women and COVID-19 Protection Kits to women and children	UNESCO, National Commission for UNESCO Timor- Leste	Immediate	10,000
Develop and distribute parenting key messages, child protection and prevention of sexual exploitation and abuse during aid provisions and training aid worker around child protection and Protection from Sexual Exploitation and Abuse (PSEA)	UNICEF-UNFPA - PNTL-JU's	Immediate	20,000
Provide food items and essential non-food items (NFI) to pregnant women, children, elderly, members of LGBTQI, PwD and HIV/AIDs including maternity and household kits, improvement of lighting in evacuation areas and toilets, personal torch to be used at times of power off, hand sanitizers and face masks to protect them from COVID-19	MSSI	Immediate	1,278,270
Ensure integration and mainstreaming of gender and protection principles across the response	UNICEF-MSSI-	Short-term	20,000

 $<sup>^{13}</sup>$  This is a support to MSSI Child Protection Officers, GBV Focal Points, Social Technical Staff at Administrative post level and **VPU** Police

through the provision of technical support to different sectors. Contextualize the Child Protection Minimum Standard in Humanitarian Settings in Timor-Leste with the support of IASC and training the Child Protection Sub-Sector members.			
Provide technical assistance and training on Psychological First Aid and the MHPSS tool kit to caregivers of residential care facilities, child protection officers, social animators, GBV focal points, teachers, community nurses or workers and services providers; continue provision of mental health and psycho-social support to children and parents in the affected areas	UNICEF-MSSI- Residential Care Facilities	Short-term	50,000
Review and revise case management policy for child protection in emergency and support to case management process of the survivor of women and child GBV survivors, including home visits and virtual follow up support14.	UNICEF-MSSI- NGOs	Short-term	30,000
Integrate emergency response and coordination in Social Welfare Workforce Capacity development including developing an accredited community based MHPSS Workforce training programme for Social Welfare and Community Health Workers	UNICEF-MSSI- MoH- academic partner	Short-term	40,000
Registration of all children in Institutional Care Facilities to identify children separated from families due to emergency and provide the support that promotes their development, family connection, reintegration and wellbeing in the family	UNICEF-MSSI and partners	Short-term	10,000
Improve baseline data and data collection to inform programming and coordination, including mapping of services and information management system	UNICEF-MSSI-	Short-term	20,000
Support to renovate WASH facilities at five residential care institutions with lighting and privacy and ensure that they are disability friendly. Recently, UN Women piloted safe toilets in one of the evacuation centers.	UNICEF-MSSI	Short-term	25,000
Provide nutritious food for families with PwD		Short-term	750,000
Total			2,368,270

<sup>&</sup>lt;sup>14</sup> Support to MSSI Child Protection Officers, GBV Focal Points, and Social Technical staff at Administrative Post level to work with families and services.

## **Food Security**



PEOPLE TARGETED TOTAL (USD) IMMEDIATE (USD) SHORT-TERM (USD)

50k \$11.58M \$1.58M \$10M

Sector Leads & Members: Secretariat of State for Civil Protection, Ministry of Agriculture and Fisheries (MAF), WFP, FAO, UNDP, UNICEF, Oxfam, Adventist Development & Relief Agency (ADRA), Agriculture innovations for communities in Timor-Leste (Al-Com), Asian Development Bank (ADB), Blue Ventures, Care International, Caritas, Cooperativa Café Timor (CCT), Child Fund, Catholic Relief Services (CRS), Embassy of Australia, Embassy of China, Embassy of Japan, Embassy of New Zealand, Embassy of Portugal, European Union (EU), Deutsche Gesellschaft fur Internationale Zusammenarbeit (GIZ), Mercy Corps, The Asia Foundation, To'os ba Moris Di'ak (TOMAK), Sustainable Agriculture Productivity Improvement Project (SAPIP), World Vision, Plan International, MDF NLC, Japan International Cooperation Agency (JICA), Korea International Cooperation Agency, KOICA, United States Agency for International Development (USAID), World Bank, World Fish

#### **People targeted**

Food security response will target three main groups:

- Those expected to be in Evacuation Centers for short-term (6+ months) = approx. 3,000 individuals
- Those returned, generally affected and food insecure in Dili Municipally = approx. 38,070 individuals
- Those affected and food insecure outside Dili = approx. 8,930

#### **Sector Objectives**

#### **Sector Overview and Priority Needs**

Overall, approximately 50,000 people are anticipated to require food security support.

Using a simplified food basket (of 6 items) this equates to monetary requirements of approximately USD 700,000 per month (excluding transportation), or about USD 10,000 per week for support in evacuation centers. Rice represents approximately 60% of this cost. Purchasing of fortified rice for future contingency stock and safety net transfers is essential to enhance the nutritional values of food assistance.

#### **Priority Needs**

- A simplified nutritious food basket and regular distribution planning.
- Food, particularly to the temporary displaced, including those in evacuation centers.

- Special foods for infants, children, pregnant and lactating women, elderly and those with preexisting health conditions.
- Cooking utensils, cooking stoves and firewood (need to be gender-sensitive at the community and household levels).

#### **Priority Response Activities**

#### **Residual Humanitarian Response**

- Rapid Needs Assessment to identify food security and nutrition needs of vulnerable groups.
- Rapid agricultural assessment to identify damages and losses of crops and livestock.
- Rapid assessment of Government seedbanks to determine the status.
- Emergency food assistance, targeting the most vulnerable groups (PwD, pregnant and lactating women, children, and the elderly).
- Distribution of seeds and agricultural tools.
- Cash transfer/cash-based intervention (cash/voucher).
- Distribution of NFIs for cooking.

#### **Transition to Recovery**

- Detailed agriculture and livelihood assessment.
- Provision of agricultural inputs to restart livelihoods and boost the local economy, taking into consideration gender-related needs.
- Provision of fishing gears, nets and other fishing tools.
- Rehabilitation of rural assets and small irrigation infrastructure.
- Livestock vaccination and de-worming activities.

#### **Humanitarian-Development Nexus**

- Support to smallholder farmers (increase local production/distribution of seeds and tools/strengthened irrigation activities)
- Enhanced Food Security & Nutrition sector coordination including the link to other sectors (Livelihood, Health, Gender & Protection)
- Technical support to the ongoing Government Cesta Basica programme (food basket/food voucher programme)
- Regular Consumer Price Index (CPI) including Market Price Monitoring
- Quarterly Food Security Bulletin
- Quarterly Agro-Climate Outlook
- Food Security Assessment including regular rice and maize production data collection at the Municipality/Suco levels
- Market Resilience Assessment
- Government and private sector rice/maize importation data collection

## Detailed list of activities and corresponding budget

Activity	Lead Ministry/Entity	Immediate / Short- term	Budget (USD)
Distribution of 20,000 MT of rice to 12 municipalities incl. RAEOA (transport and insurance)	National Logistics Center	Immediate	500,000
Logistics support to National Logistics Center	National Logistics Center, WFP	Immediate	500,000
Purchasing of farming equipment (hoses, irrigation units, excavators, etc.)	Ministry of Agriculture and Fisheries	Immediate	300,000
Purchasing of quickly growing vegetable seeds	Ministry of Agriculture and Fisheries	Immediate	250,000
Replacement of damaged food stocks (beans 4,250 kg; red beans 2,200 kg; corn 1,250 kg; wheat 1,999 kg; sugar 500 kg)	Ministry of Agriculture and Fisheries	Immediate	25,625
Strengthening Government Supply Chain Capacity	National Logistics Center, WFP	Short-term	500,000
Warehouse management and rehabilitation	National Logistics Center, WFP	Short-term	1,000,000
Procurement of fortified rice	National Logistics Center	Short-term	2,500,000
Repair and rehabilitation of 17 irrigation channels affected by floods	Ministry of Agriculture and Fisheries	Short-term	5,000,000
Support to food production through mechanization (hand-tractors, cereal processing equipment)	Ministry of Agriculture and Fisheries	Short-term	1,000,000
Total			11,575,625

#### **Nutrition**



PEOPLE TARGETED	TOTAL (USD)	IMMEDIATE (USD)	SHORT-TERM (USD)
1.5k	\$1.4M	\$ 406k	\$1M

Sector Leads & Members: Ministry of Health (MoH), Ministry of Agriculture and Fisheries (MAF), Secretariat of State for Civil Protection, UNICEF, WFP, WHO, Catholic Relief Services (CRS), ChildFund, Fundasaun Alola, Maluk Timor, Partnership for Humanitarian Development (PHD), To'os ba Moris Di'ak (TOMAK), World Vision

#### **Sector Overview and Priority Needs**

The majority of children in Timor-Leste are directly affected by malnutrition, with 47.1% of under-five children categorized as stunted<sup>15</sup>. The combined moderate and severe stunting rate for children starts from birth, with a rate of 13.4% for infants 0-5 months<sup>16</sup>, and for infants 48 – 59 months, the rate reaches 55.3%, which is beyond the critical situation. An average of 8.6% of children under five are wasted with prevalence starting to peak at age 6-11 months (9.0%) and increases until the age 12-23 months (9.8%). In terms of feeding practices, 64.2% of infants 0-5 months were exclusively breastfed, and at 2 years 67.8% continued to be breastfed and 32.1% were bottle-fed nationally.

Given the high level of malnutrition in the country, it is important to ensure access to quality nutrition services in the humanitarian crisis. Post-floods monitoring reports identified that breastmilk substitutes were donated to the flood-affected population by individuals, which is contrary to infant and young child feeding guidelines during emergencies. Monitoring reports also showed the donation of unhealthy foods, including candies and highly processed foods. The coverage of vitamin A supplementation was 77.8%, deworming 71.4% and multiple micronutrient powder 18.1%.

The Nutrition sector response will aim to achieve the following sector objectives:

- Provide access to quality curative nutrition services through the most appropriate modalities, systematic identification, referral, and treatment of acutely malnourished cases in collaboration with the Health sector.
- 2. Strengthen the quality and scale of preventative nutrition services for the most vulnerable groups through promotion of appropriate infant and young child feeding practices, micronutrient supplementation and optimal maternal nutrition.
- 3. Strengthen the coordination mechanism between nutrition, food security, health and WASH sectors.

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<sup>&</sup>lt;sup>15</sup> Timor-Leste Food and Nutrition Survey 2020, Nutrition Department Ministry of Health, Timor-Leste

<sup>&</sup>lt;sup>16</sup> then 20.9% at 6-11 months of age and then more than doubles from 12-23 months (51.9%).

#### **Priority Needs**

- Early detection and referral of malnutrition cases
- Continuation of nutrition services for vulnerable groups, including children under-5 and pregnant and lactating mothers
- Counseling support for adoption of appropriate feeding practices
- Micronutrient supplementation
- Coordination with Food Security and WASH sectors

#### **Priority Response Activities**

#### **Residual Humanitarian Response**

- Implementation of comprehensive nutrition programme, including essential nutrition actions
- Supplementary food distribution for Moderate Acute Malnutrition (MAM) cases
- Identification and referral of Severe Acute Malnutrition (SAM) cases to nearest operational health centers
- Treatment of malnutrition cases
- Management of acute malnutrition targeting about 90 % of severely malnourished children 6-59 months. This will be achieved by increasing the program coverage for CMAM especially in the affected municipalities. Routine screening, referral and follow-up for 3,600 children 6-59 months by Mother Support Groups and in collaboration with the Municipality Health Services and the health sector and treatment of 1,200 cases suffering from acute malnutrition in affected population. This will include strengthening the referral system with the inpatient management for cases suffering from severe acute malnutrition with medical complications.
- Prevention of acute malnutrition by undertaking protection, promotion and support activities for infant feeding in emergencies to 1,040 pregnant and 1,420 breastfeeding women, distribution of micronutrients powder (MNP) to 1,820 children of 6-23 months and supplementation of Vitamin A and routine deworming to reach 1,200 for 6-59 children, and iron folate will reach 1,040 pregnant women. Scale up the implementation of provision of nutritious food for children under the age of five and pregnant and breastfeeding women.
- Micronutrient supplementation
- Awareness raising including distribution of IEC materials related to nutrition, hygiene and Infant and Young Children Feeding
- Strengthen coordination with food security, health, education, child protection and WASH.

#### Transition to Recovery

- Provide necessary guidance and technical support to resume regular and essential nutrition services and support of recovery of nutrition services in affected communities.
- Provide nutrition supplements, especially micronutrients for targeted pregnant and lactating women, children with disabilities, priority given to families with under-5 children.
- Conduct screening, referrals provide timely treatment and follow-up of cases suffering from SAM in the affected population.
- Conduct awareness campaigns on regular screenings for the detection of SAM and MAM for a timely-triggered response.
- Monitor and manage the donations of breastmilk substitutes and support Infant and Young Child Feeding (IYCF) counselling.

- Continue to monitor the pattern of childhood diseases (diarrhea, acute respiratory infection) and impact on acute malnutrition.
- Monitor the intervention coverage and technical compliances of the intervention.

#### **Humanitarian-Development Nexus**

- Promote risk communication on malnutrition
- Conduct training and capacity building of health service providers, including mother support group (MSG) members for preventative nutrition services
- Development of nutrition surveillance module
- Implement nutrition-sensitive agricultural programming

#### **Detailed list of activities and corresponding budget**

Activity	Lead Ministry/Entity	Immediate / Short-term	Budget (USD)
Implementation of comprehensive nutrition programme, including essential nutrition actions	MoH, Nutrition Sector Partners	Immediate	25,000
upplementary food distribution for Moderate Acute Malnutrition (MAM) cases	MoH, WFP, UNICEF	Immediate	50,000
dentification and referral of Severe Acute Malnutrition (SAM) cases to nearest operational health centers	MoH, WHO, UNICEF, Fundasaun Alola, MalukTimor	Immediate	40,000
reatment of malnutrition cases	MoH, WHO, UNICEF, and WFP	Immediate	105,000
Management of acute malnutrition targeting bout 90 % of severely malnourished hildren 6-59 months.	MoH, WHO, UNICEF	Immediate	30,000
Prevention of acute malnutrition by undertaking protection, promotion and support activities for infant feeding in emergencies to 1,040 pregnant and 1,420 preastfeeding women, distribution of micronutrients powder (MNP) to 1,820 children of 6-23 months and supplementation of Vitamin A and routine deworming to reach 1,200 for 6-59 children, and iron folate will reach 1,040 pregnant women.	MoH, WFP, UNICEF, WHO, Fundasaun Alola, MalukTimor	Immediate	50,000
Scale up the implementation of provision of nutritious food for children under the age of five and pregnant and breastfeeding women.	MoH, Nutrition Sector Partners	Immediate	30,000
Micronutrient supplementation	MoH, UNICEF and WFP	Immediate	40,000
Awareness raising including distribution of EC materials related to nutrition, hygiene and Infant and Young Children Feeding	MoH, WFP, UNICEF, WHO, Fundasaun Alola, MalukTimor	Immediate	30,000
Strengthen coordination with food security, health, education, child protection and WASH.	MoH, UNICEF, and WFP	Immediate	6,000

support to resume nutrition services a	guidance and technical regular and essential and support of recovery of a affected communities.	MoH, WFP, UNICEF, WHO, Fundasaun Alola, MalukTimor	Short-term	14,000
micronutrients for t	upplements, especially cargeted pregnant and nildren with disabilities, nilies with under-5	MoH, WFP, UNICEF, WHO	Short-term	150,000
	referrals provide timely w-up of cases suffering fected population.	MoH, WFP, UNICEF, WHO, Fundasaun Alola, MalukTimor	Short-term	350,000
	campaigns on regular letection of SAM and riggered response.	MoH, WFP, UNICEF, WHO, Fundasaun Alola, MalukTimor	Short-term	150,000
	ge the donations of tes and support Infant eding (IYCF) counselling.	MoH, WFP, UNICEF, WHO, Fundasaun Alola	Short-term	136,000
Continue to monito childhood diseases respiratory infectio malnutrition.	•	MoH, WFP, UNICEF, WHO, Fundasaun Alola,	Short-term	140,000
	ention coverage and ces of the intervention.	MoH, Nutrition Sector partners	Short-term	60,000
Total				1,406,000

# Health



PEOPLE TARGETED TOTAL (USD) IMMEDIATE (USD) SHORT-TERM (USD)

193k \$ 2.67M \$ 0.76M \$ 1.91M

Sector Leads & Members: Ministry of Health (MoH) (SNAEM, I.P. and SSM Dili), Secretariat of State for Civil Protection, WHO, UNFPA, UNICEF, IOM, Health Alliance International (HAI), Australian Department of Foreign Affairs and Trade (DFAT), Cruz Vermelha Timor-Leste (CVTL), European Union (EU), Maluk Timor, Marie Stopes Timor-Leste (MSTL), PRADET, Saude Ba Ema Hotu (SABEH)

### **Sector Overview and Priority Needs**

#### **Sector Strategic Objectives**

- Improve access to and revitalize basic health services in the affected areas
- Strengthen disease surveillance
- Strengthen prevention and control of communicable diseases: water borne diseases, vector borne diseases and public health diseases of importance such as: diarrheal diseases, dengue, Acute Respiratory Infection (ARI), VPDs, tuberculosis (TB), HIV/AIDS, malaria, NTDs and noncommunicable diseases (hypertension, DM, CVDs)
- Provide technical support to priority public health interventions: maternal and child health, immunization, health promotion and community engagements, mental health and psychosocial support, treatment of drinking water, etc.
- Strengthen prevention and control of COVID-19 pandemic in the affected population
- Provide emergency medicines, oral rehydration solutions (ORS, Personal Protective Equipment (PPE) kits, DDK, IEHKs, MCKs, LLINs (impregnated long lasting nets), reagents, laboratory equipment, and other health kits.

#### **Current situation**

- The rapid health facility assessment (RHFA), covering 25 health facilities in Dili and 43 major community health centers (CHC) in the municipalities showed the damage of health facilities. The report revealed that the infrastructure of5 (7%) health facilities were severely damaged: SAMES, National Health Laboratory and HPs (Tasi Tolu, Kampung Alor and Manleuana). Additionally, 3 (4%) health facilities were moderately damaged; 5 (7%) suffered minor damaged; and there was no damage to the remaining 54 (80%).
- The rapid health facility assessment (between 8-20 April 2021) in 25 health facilities (hospitals, community health centers, health posts and major private clinic) in Dili revealed that: 56% of health facilities were affected by floods. Diseases have affected 20 health staff (80%), namely with ARI 92%, diarrheal diseases (84%), skin diseases (80%), suspected dengue (24%), and other diseases (64%) such as acute gastritis, hypertension and vaginal infections. There are no reports of malaria

and measles. Only 22(88%) health facilities surveyed reported have sufficient health staff, and 3 (12%) reported partial availability of staff as their homes were affected by floods. Stock out of some essential medicines have been destroyed (20%), health equipment (20%), cold chains (12%) and other stocks were damaged (40%). Only one (60%) health facility reported receiving drugs one month before and during the survey month, while the remaining 40% reported stock out of drugs, receiving their last stock 2 months ago or longer. 76% of all health facilities were reported as functioning, as well as 64% of mobile clinics and 84% of referral systems. The health staff reported 60% barriers to access the health services, mainly due to the lockdowns and state of emergency. There is a limited availability of post rape kits (16%) and post exposure prophylaxis (PEP) – 21%.

- Three deaths of Children Under Five (CUF) were reported from Dili municipality between 27 April and 3 May. One 4-year old and one baby (1.4 months) died due to suspected diarrheal diseases and a 1-year old died due to ARI in the flood-affected community in Masilidun, Tasi-Tolu.
- Out-Patient Department (OPD) and Inpatient Department (IPD) attendance has been disrupted in flood affected areas due to access issues. SSM Dili reported a high number of total consultations, 4,342 consultations, for: ARI (23%), skin diseases (15%), acute gastritis (6%) and diarrheal illness (4%) and hypertension (2%). Of the total consultations, the high-risk groups received medical assistance were 2,145 (49%). Of these 2,145 high risk group consultations, it consisted of: CUF 1,746 (81%), pregnant women 175 (8%), lactating women 73 (4%), disabled 10 (0.7%) and elderly 136 (6%). There was delayed medical assistance in high-risk evacuation centers and flood affected communities at Tasi-Tolu due to lack of medical camp kits, Intra-agency Emergency Health Kits (IEHKs), diagnostics tools, kits as well as operational support to maintain temporary medical assistance.
- WASH in flood-affected facilities has been affected adversely. Safe drinking water is not always available. Following the report of three deaths amongst flood-affected populations, water testing was conducted on 30 April at high-risk flood-affected communities. Masilidun (Tasi-Tolu) revealed exposure to manganese (Mn) and total dissolved solutions (TDSs). No exposure to E. coli nor total coliforms were detected.

#### **Priority Needs**

- Conduct an in-depth assessment of infra-structural damage and stock-outs of essential medicines at affected facilities.
- Continue supporting mobile clinics in the interim
- Strengthen early warning systems (EWS) and surveillance of communicable diseases that are prone to outbreaks. Ensure treatment and management of chronic and NCDs
- Ensure the provision of health care for the common diseases at risk of increasing post flood, such
  as water borne diseases and vector borne diseases including undisrupted access to mental health
  and psychosocial support, including to first respondents and service/healthcare providers
- Increase frontline workers' access to PPE and knowledge of COVID-19 prevention and risk
  mitigation measures and protocols through strengthening prevention and control of COVID-19
  pandemic in affected population.
- Improve WASH situation in affected facilities including implementation of water safety plans, in close collaboration with the WASH Sector, including UNICEF.
- Ensure the provision of potable water (including chlorination) and sewage disposal/toilets, in collaboration with partners, including UNICEF

- Provision of sexual and reproductive health services and family planning kits, including delivering
  of maternity and dignity kits for specific healthcare needs of women and children and of persons
  with disabilities (in collaboration with UNFPA and HAI)
- Provision of emergency medicines, ORS, PPE kits, DDK, IEHKs, MCKs, LLINS, reagents, laboratory equipment, and other health kits.

## **Priority Response Activities**

#### **Residual Humanitarian Response**

- Ensure continuity of health facilities to provide clinical care for patients affected by the flood, with a focus on water-borne, vector-borne and mental health issues and injuries.
- Continue monitoring for post-flood illnesses and diseases through disease surveillance and supportive supervision
- Provide safe water to application of water safety plan approach, temporary latrines, soap and hygiene promotion education (with focus on the different gender needs) (link with WASH sector)
- Distribute of ILLN; provide maternity and dignity kits to families and people with special needs including disabled persons.
- Provide psychological support, with special focus on highly vulnerable groups such as children (link with Gender & Protection Sector)
- Provide technical assistance and supplies to prevent/mitigate risk of COVID-19 outbreak
- Provide emergency supply of medicines, diagnostic kits, reagents, PPE kits, DDKs, IEHKs, MCKs and other related equipment
- Re-establish health services and care, including MHPSS and GBV, VAC, and CMR

#### **Short Term and Transition to Recovery**

- Secure funding for health facility repairs
- Support medium term clean-up and refurbishment of affected facilities
- Address medicines and supply shortages in collaboration with affected facilities, municipalities and SAMES
- Gradually phase out mobile clinics as health facilities become fully functional.
- Advocate to upgrade or reallocate health care facilities or redesign infrastructure of health care facilities/ hospitals located in vulnerable areas to floods and landslides.
- Enhance surveillance and risk assessment of outbreak prone diseases in all affected areas for early detection and response.
- Increase awareness on public health risks and prevention associated with flooding and as well as prevention, including community mobilization and communication for behavioral change.
- Strengthening the capacity of local health facilities to treat and support of patients affected by the floods, including longer-term associated impacts (such as mental health or psychological disorders.)
- Strengthen communication on IPC measures in prevention for COVID-19.
- In cases of long-term displacement, provision of MHPPS along with safe referrals to health and medical services within Child-Friendly Spaces and Women and Girls Friendly Spaces
- Establishment of a pathway of health education including CSE education within education protocol during long-term displacement (link with Education sector)

# **Humanitarian-Development Nexus**

• Building the capacity of first respondents, Community Based Organizations (CBOs) and local health workers to respond to health emergencies

# **Detailed list of activities and corresponding budget**

Activity	Lead Ministry/Entity	Immediate / Short-term	Budget (USD)
Rehabilitate affected health facilities	WHO, MoH	Immediate	50,000
		Short-term	200,000
Strengthen diseases surveillance through integrated medical care services and control of communicable	WHO, MOH, NGOs	Immediate	75,000
and chronic/non communicable diseases and mental health and psychological support		Short-term	200,000
Strengthen vector-borne disease control through dengue control and community mobilizations	WHO, MoH, CVTL, NGOs	Immediate	50,000
		Short-term	200,000
Improve WASH through promoting water safety plans, sanitation and handwashing in collaboration	WHO, MoH, UNICEF	Immediate	25,000
with WASH sector		Short-term	75,000
Provide emergency medicines, ORS, PPE kits, DDK, IEHKs, MCKs, impregnated long lasting nets,	WHO, MoH, UNICEF	Immediate	225,000
reagents, laboratory equipment, and other health kits		Short-term	375,000
Improve sexual and reproductive health through delivery of maternal health kits and dignity kits, PEP	UNFPA, MoH, HAI, MSTL	Immediate	50,000
kits for specific needs of women, children and disabled persons		Short-term	150,000
Improve maternal and child health including IMCI and immunization	UNICEF, MoH	Immediate	280,000
		Short-term	710,000
 Total			2,665,000

# Education



PEOPLE TARGETED TOTAL (USD) IMMEDIATE (USD) SHORT-TERM (USD)

51.2k \$3.1M \$0.5M \$2.6M

(School children - 50k

Teacher – 1.2k)

Sector Leads & Members: Ministry of Education, Youth and Sport (MoEYS), Secretariat of State for Civil Protection, UNICEF, Plan International, ChildFund, Care International, Help and Nurture Developing Societies (HANDS), Oxfam, Portuguese Embassy, Timor-Leste Coalition for Education (TLCE), World Vision

## **Sector Overview and Priority Needs**

The recent flooding and associated windstorms and landslides affected at least 35 schools across the country. Of these, 16 were severely damaged and needed urgent renovation and/or complete reconstruction. In the capital Dili, which was the worst hit, at least 26 schools were affected to varying degrees. Of these, 7 schools were severely damaged. The damage and destruction to schools have further undermined efforts to improve infrastructure facilities that can support effective and quality learning in schools.

When the floods struck, schools in Dili and several other municipalities had already been closed for nearly a month due to a surge in COVID-19 cases. Tens of thousands of students who already had their learning disrupted due to COVID-19 are potentially facing longer periods of uncertainty regarding resumption of schooling. These long periods of school closure can result in learning losses for children and can have dire consequences for the nation's development.

The table below shows the number of schools that have been damaged by flooding and associated landslides and windstorms:

	Severe Damage	Moderate Damage	Flooded and Needs Cleaning	Total
Dili	7	11	8	26
Baucau	1	0	0	1
Lautem	1	0	0	1

Liquica	1	0	0	1
Manufahi	6	0	0	6
Total	16	11	8	35

#### **Priority Needs**

- Setting up temporary learning spaces in evacuation centers for displaced children and families including construction of temporary toilets (sex segregated) in schools and temporary learning spaces
- Printing and distribution of textbooks and teaching/learning materials for all levels
- Psychosocial support for children/teachers/school staff
- Cleaning of schools and classrooms affected by flooding before schools reopen
- Cleaning of schools used as evacuation centers before schools reopen
- Development of distance learning programmes and regular student-teacher interface (on-line, by phone or in person in small groups following COVID-19 prevention protocols)
- Rehabilitation of school buildings including kitchen, WASH and other school facilities
- Construction of temporary/emergency classrooms
- Guidance from the Ministry of Education, Youth and Sport (MEYS) to school administrators and teachers about work expectation while in-person classes are suspended
- Hiring of relief teachers or teacher assistants where learning activities need to follow strict COVID-19 prevention protocols of physical distance, small neighborhood and household cluster groups

#### Transition to Recovery (longer-term needs) (budget approximately USD 10,000,000)

- New construction of damaged schools with facilities including adequate classrooms, staff rooms, libraries, kitchen, laboratories, fencing, WASH facilities and access to clean water
- Procurement of furniture for classrooms (preschool to secondary level)
- Procurement of laboratory equipment, library books, computers and sports equipment
- Early re-opening of schools (including preschools) and Back to School Campaigns

## **Humanitarian-Development Nexus**

- Integration of Emergency Preparedness and Response (EPR) activities into Education sector planning
- Implementation of comprehensive school safety pillars: safe learning facilities; school disaster management; and, DRR climate change and resilience education

- Strengthen the capacity of the education system on more effective preparedness and response interventions, and more attention to narrow the digital divide for the most marginalized and vulnerable children and work expectations of teachers when normal classes are suspended.
- Awareness raising and conduct skills trainings to build capacities for children on what they should and/or shouldn't do before, during and after disasters to prevent injuries and drowning. Ensure promotion and application of COVID-19 preventive methods (e.g. handwashing, maintaining a safe distance and face mask-wearing)
- Ensure the continued learning of affected students through supporting the MEYS in the establishment of safe temporary child-friendly and gender-responsive learning spaces in affected communities where school facilities cannot be used and support the provision of distance & online learning opportunities where/when possible.
- Strengthened support for follow-up measures regarding school drop-out cases to ensure continued education and quality learning, paying attention to gender and protection issues.
- Intensifying of school health services to ensure the physical and psycho-social well-being of students and teachers.

# **Detailed list of activities and corresponding budget**

Activities	Implementing partners	Immediate or Short-term	Funding Gap (USD)
Setting up of temporary learning spaces, including temporary WASH facilities	MoEYS, UNICEF, Plan Int'l, Sector Partners	Immediate	100,000
Provision of materials for learning activities in shelters	MoEYS, UNICEF, Plan Int'l, Sector Partners	Immediate	100,000
Provision of home-based learning materials, and guidance for parents as appropriate	MoEYS, UNICEF, Plan Int'l, Sector Partners	Immediate	100,000
Cleaning of schools affected by flooding	MoEYS, UNICEF, Plan Int'l, Sector Partners	Immediate	50,000
Cleaning and rehabilitation of schools used as evacuation centers	MoEYS, UNICEF, Plan Int'l, Sector Partners	Immediate	50,000
Psychosocial support for children and teachers	MoEYS, UNICEF, Plan Int'l, Sector Partners	Immediate	50,000
Back to School Campaign	MoEYS, UNICEF, Plan Int'l, Sector Partners	Immediate	50,000
Provision of take-home rations (nutritious food baskets) to students in affected schools	MoEYS, WFP, Sector Partners	Short-term	100,000
Renovation and rehabilitation of school buildings before reopening of schools	MoEYS, UNICEF, Plan Int'l, Sector Partners	Short-term	500,000

Construction of temporary/emergency classrooms and WASH facilities (incl. sex segregated toilets)	MoEYS, UNICEF, Plan Int'l, Sector Partners	Short-term	1,000,000
Procurement of furniture and equipment to meet short-term needs	MoEYS, UNICEF, Plan Int'l, Sector Partners	Short-term	500,000
Printing and distribution of textbooks and teaching/learning materials to schools and learning centers	MoEYS, UNICEF, Plan Int'l, Sector Partners	Short-term	500,000
Total budget			3,100,000

# Early Recovery and Livelihoods



PEOPLE TARGETED	TOTAL (USD)	IMMEDIATE (USD)	SHORT-TERM (USD)
PEUPLE LARGETEIL			CHURI-TERM (IICII)

28.7k \$ 6.38M \$ 2M \$ 4.38M

Sector Leads & Members: Secretariat of State for Civil Protection, Ministry of Finance (MoF), Ministry of State Administration, SEFOPE, Ministry of Agriculture and Fisheries (MAF), UNDP, UNESCO, UN Women, Mercy Corps, Adventist Development and Relief Agency, CARE International Timor-Leste, Catholic Relief Services (CRS), Child Fund Australia, Japan International Cooperation Agency (JICA), Oxfam, Plan International

## **People targeted**

Flood affected communities in all municipalities, marginalized and vulnerable households, farmers and fishers affected by flood, households affected by flood, persons with disabilities, women headed households, older persons, farmers groups, Small and Medium Enterprises (SMEs) that were affected, informal workers who lost their livelihoods, men and women who lost their sources of income due to floods.

# **Sector Overview and Priority Needs**

The preliminary findings of the Multi-Sectoral Rapid Needs Assessment and the Household Damage and Needs Assessment suggest that more than 550 residential houses have been completely destroyed, about 900 badly damaged, and another 1,900 sustained minor damages in Dili municipality. Data from other municipalities are not available. Preliminary findings suggest that a total of 2,163 hectares of agricultural areas have been reportedly affected by the flooding. One of the key challenges for this sector is that early recovery and livelihoods is a cross-sectoral topic and there have not been livelihoods focused assessments to gather more comprehensive data on the socio-economic impacts of the flood on households and individuals, farmers, small businesses, fishers, etc. However, organizations working in livelihoods have collected information from their implementing partners, community groups they have been supporting through their regular programmes and from field-based staff to estimate the extent of the loss and its impact on the sources of incomes, businesses, and livelihood opportunities.

#### **Priority Needs**

- Undertake impact, needs and capacity assessments focused on local economic resources and livelihood opportunities including labour market surveys and analysis
- Provide inputs/materials to rebuild livelihood base of households, farmers, SMEs, marginalized communities that were affected by the flood, including women and those most vulnerable such as PwDs
- Re-build the partially or fully damaged houses
- Promote short-term and long-term livelihoods recovery, that could include emergency employment, provision of inputs for the farmers (e.g. seeds, seed storage, horticulture training, equipment they have lost, livestock that were lost; fertilizers, pest control, support for animal health, kitchen or small gardens that were destroyed)
- Rehabilitating the agricultural lands that were flooded or damaged by landslides
- Restoring damaged fishponds
- Support SMEs that were affected (through financial products that can help them to bounce back and continue their business, and through training in business plan development, marketing, etc.)
- Provide access to cash for households and farmers/fishers.
- Facilitate access to markets through transport and logistics to
- Provision of materials and support to repair/maintain infrastructure and utilities (electricity, water irrigation, road, market facilities and storage facilities giving short-term employment opportunities for informal workers and youth (with attention to ensuring women and PwDs can access opportunities, including by using temporary special measures)

# **Humanitarian-Development Nexus**

- Agriculture science and technology development, introducing changes in agricultural practices for a more climate-resilient agriculture sector
- Provide opportunities for diversification of livelihood development of service industry, agroforestry, livestock management and market development
- Create opportunities for digitization not only to receive disaster related information and collect data, but also to use for other purposes such as receiving market information, increase access to financial services, marketing products etc.
- Strengthen capacity of market actors buyers, sellers, traders etc. in disaster situations. Develop social security system – targeted assistance for women, vulnerable groups, temporary employment loss, and other circumstances
- Ensure that gender is mainstreamed across these areas to address underlying disparities in access to knowledge, skills, and assets

- Strengthen capacity of DRM structure at central, municipality and community levels
- Capacity development of Government Agencies and at risk-communities for flood resilient infrastructure/technologies and risk reduction measures (flood control and drainage system, Biopori, afforestation, slope stabilization etc.)
- Conservation of water-catchment areas and improve watershed management including local communities
- Research and development of flood resilient livelihoods and farming practices
- Improve national capacity for flood monitoring and early warning system (EWS)
- Enhance community capacity for disaster preparedness and response

# **Priority Response Activities**

Immediate Humai	nitarian Response Needs		
	Activities	Implementing partners	Funding gap (USD)
Cash transfer to very poor farmers, fishers Target: 10,000 individuals @ USD 200 per person	Direct (unconditional) cash-transfers to support affected households and communities <sup>17</sup> including farmers, fishing communities, and SMEs Accountability mechanisms in place for monitoring and reporting	MAF, Mercy Corps	2,000,000
Short-term Needs	s (up to 31 Dec 2021)		
Support to farmers/fishing community for recovery <sup>18</sup> Target: 10,000	Various inputs for the affected farmers (e.g. horticulture training, seeds, livestock that were lost, fertilizers, fodder production, animal health, pest control, farming tools)	Plan International, ADRA	400,000
raiget. 10,000	Purchasing fishing equipment, medium sized and small boats, nets, purchasing motors for boats	MAF	350,000
	Rehabilitating the agricultural lands that were flooded (could be cash for work)	MAF	200,000
	Restoring the fishponds that got damaged and repairing fishing boats and fishing equipment (could be cash for work)	MAF	200,000
Greening and cleaning the environment / solid waste management	Restoring green spaces, public parks that got damaged, and planting trees in inland and coastal areas (which could be done through	Secretary of State for Environment	200,000

<sup>&</sup>lt;sup>17</sup> https://interagencystandingcommittee.org/system/files/2020-05/Grand%20Bargain%20-

<sup>%20</sup>Importance%20of%20cash%20transfers%20in%20gender%20sensitive%20response%20to%20C0VID-19.pdf

<sup>&</sup>lt;sup>18</sup> Purchasing of seeds and farming equipment are put under the food security category (page 5 of the government's table; but they have been included here as the food security section did not include this activity)

Target: 700 individuals	"cash for tree" scheme or cash for work modality)		
raiget. 700 marviadaio	Community based reforestation and conservation (in 10 Sucos: Tasi tolu, Maloa, Mota Ulun Bekora, Lahana, Manleuana, Beduku, Bidau, Metiaut, Bekusi, Balide)	Secretary of State for Environment	70,000
	Ocean and coastal areas clean-up	Secretary of State for Environment	20,000
	Construction of Biopori center and 200 biopori holes	Secretary of State for Environment	14,000
Community infrastructure reconstruction and rehabilitation Target: 5,000 persons employed for short term	Cleaning up beaches and neighborhoods, removing debris, and rehabilitation of community infrastructures such as water facilities, small irrigation facilities, community centers, food storage or warehouses, market sheds, drainage, pavements, fishponds, etc. (cash for work modality)	UNDP, SEFOPE, (MSA)	2,000,000
	Creation of water catchment areas on mountain tops for rainwater harvesting and watershed management in river basins	Secretary of State for Environment	40,000
Recovery support to the SMEs Target: 200 (will benefit their family members too, assuming 5 per household. Therefore, a total of 1,000)	Support the SMEs that were affected (through financial products that can help them to bounce back and continue their business; training in business plans and re-establishing their businesses)	MAF, UNDP, ILO, (MTCI)	250,000
Disaster Risk Reduction (DRR) and assessments	Strengthening the capacity and performance of hydrometeorological observation and warning dissemination	UNESCO, Department of Meteorology & Geophysics under Ministry of Transportation & Communication	20,000
	Disaster risk assessment of 5 Sucos (Tasi Tolu, Becora, Lahane, Bairopite, Komoro)	Secretary of State for Environment	5,000
	Inspection teams from Civil Protection to evaluate reconstruction and determine risk for vulnerability (Civil Protection)	Civil Protection	500,000
	Coordination, socialization of communities, identification and mapping for final report	Ministry of Justice	25,000
Policy and institutional support	Development of job/livelihood strategy that bridges emergency job creation to medium and long-term sustainability and disaster resilience	ILO, SEFOPE	50,000
	Supporting Linkages of Emergency Job Livelihood Programmes to Existing Social Protection Structures (so as to respond and protect against future shocks)	ILO, MSSI	40,000
	Total Budget		4,384,000

## **Humanitarian-Development Nexus**

- Agriculture science and technology development, introducing changes in agricultural practices for a more climate-resilient agriculture sector
- Provide opportunities for diversification of livelihood development of service industry, agroforestry, livestock management and market development
- Create opportunities for digitization not only to receive disaster related information and collect data, but also to use for other purposes such as receiving market information, increase access to financial services, marketing products etc.
- Strengthen capacity of market actors buyers, sellers, traders etc. in disaster situations. Develop social security system – targeted assistance for women, vulnerable groups, temporary employment loss, and other circumstances
- Ensure that gender is mainstreamed across these areas to address underlying disparities in access to knowledge, skills, and assets
- Strengthen capacity of DRM structure at central, municipality and community levels
- Capacity development of Government Agencies and at risk-communities for flood resilient infrastructure/technologies and risk reduction measures (flood control and drainage system, Biopori, afforestation, slope stabilization etc.)
- Conservation of water-catchment areas and improve watershed management including local communities
- Research and development of flood resilient livelihoods and farming practices
- Improve national capacity for flood monitoring and early warning system (EWS)
- Enhance community capacity for disaster preparedness and response

# **Emergency Logistics**



PEOPLE TARGETED	TOTAL (USD)	IMMEDIATE (USD)	SHORT-TERM (USD)
n/a	\$100k	\$ 90k	\$10k

Sector Leads & Members: Secretariat of State for Civil Protection, MSSI, WFP, IOM, UNFPA, UNICEF, CARE, Oxfam, Plan International, World Vision

# **Sector Overview and Priority Needs**

Logistics response efforts into affected areas continues to be constrained due to lack of access to remote areas due to the topographical nature of Timor-Leste, damage to logistics infrastructure, as well as the timely dissemination of logistics information. Key logistics needs identified in support of the flood response are: transportation services; storage in isolated district locations; and sub-national coordination mechanisms to help mitigate reduced logistics capacity and to augment existing logistics capacities, especially in remote areas.

The Emergency Logistics sector continues to focus on filling the logistics gaps faced by programmatic sectors and Government leads, enabling them to implement sectoral response plans and reach people in need in affected districts. The Emergency Logistics sector will continue to provide crucial logistics services such as in-land transportation, storage, and emergency airlift transport to ensure a predictable and reliable logistics supply chain. Emergency airlift operations to reach isolated locations will continue for a limited period.

In line with recovery efforts, as well as the longer-term need for enhanced preparedness and logistics capacity across the country, dedicated logistics training across diverse areas such as warehouse management, supply chain planning, logistics preparedness and shipping will be held. Combined with the provision of logistics equipment, this will further help to enhance local logistic response capacities.

#### **Priority Needs**

- Humanitarian access (incl. helicopter) to access remote areas and cut-off communities as a result of the floods.
- Repair of roads, bridges and other public logistics infrastructure.
- Information management to enhance the collection, analysis and dissemination of logistics information.

# **Priority Response Activities**

#### **Immediate Humanitarian Response**

- Provide logistics services (inclusive of transportation, supply chain planning, and warehousing) in support of the sectoral flood response
- Maintain national logistics coordination mechanisms in support of humanitarian actors

#### **Transition to Recovery**

• Enhance the logistics capacity of Government and humanitarian partners through logistics and preparedness trainings, as well as in the provision of necessary equipment

# **Humanitarian-Development Nexus**

 Capacity building as a cross-cutting activity will remain a part of sectoral operational plans. Capacity building will focus on Government institutions tasked with leading emergency response and coordination efforts both at national and district/municipal level.

# **Detailed list of activities and corresponding budget**

Activities	Implementing partners	Immediate or Short-term	Funding Gap (USD)
Provide logistics services (inclusive of transportation, supply chain planning, and warehousing) in support of the sectoral flood response	Civil Protection, WFP	Immediate	30,000
Maintain national logistics coordination mechanisms in support of humanitarian actors	Civil Protection, WFP	Immediate	60,000
Enhance the logistics capacity of Government and humanitarian partners through logistics and preparedness trainings, as well as in the provision of necessary equipment	Civil Protection, WFPs	Short-term	10,000
Total budget			100,000

# **Annexes**

# **Partners**

Those who wish to contribute directly to the Government's response efforts through the Government's Fundo Emergencia can do so through direct transfer to the following Government account:

Name of Bank: Banku Sentral

Name of Bank Account: Fundo Emergencia IBAN Number: TL38 9000 0001 0000 3712 161

The following partners are working together on the flood response, under the leadership of the Government of Timor-Leste. Humanitarian donors interested in supporting the priority activities identified in this Plan through humanitarian partners are requested to contact the respective partners directly.

Government of Timor- Leste	UN Agencies	Humanitarian Partners
Dili Municipality (Water,	FAO (Food Security)	Adventist Development & Relief Agency (ADRA) (WASH,
Sanitation & Hygiene)	1011 (000)1/5	Food Security, Early Recovery & Livelihoods)
	IOM (CCCM/Emergency	Agriculture innovations for communities in Timor-Leste
Ministry of Agriculture &	Shelter, Health, Gender &	(Al-Com) (Food Security)
Fisheries (MAF) (Food	Protection, Logistics)	Alola Foundation (Gender & Protection)
Security, Nutrition, and		Alumni of Youth Parliament (Gender & Protection)
Early Recovery &	UNDP (Early Recovery &	Arcoiris (Gender & Protection)
Livelihoods)	Livelihoods, WASH, Food	Asian Development Bank (ADB) (Food Security)
	Security, Gender &	Asisténsia Legál ba Feto no Labarik (ALFeLa) (Gender &
Ministry of Defense	Protection)	Protection)
		Associacao Deficientes de Timor-Leste (ADTL) (Gender
Ministry of Education,	UNESCO (Gender &	& Protection)
Youth and Sport	Protection, Early Recovery &	Australian Department of Foreign Affairs and Trade
(Education Sector)	Livelihoods)	(DFAT) (Health)
		Ba Futuru (Gender & Protection)
Ministry of Finance (Early	UNFPA (Health,	Black Angels (Gender & Protection)
Recovery & Livelihoods)	CCCM/Emergency Shelter,	<b>Blue Ventures</b> (Food Security, CCCM/Emergency Shelter)
	Gender & Protection,	CARE International (Gender & Protection, Education,
Ministry of Health (MoH),	Logistics)	Early Recovery & Livelihoods, Logistics)
(Health, Water, Sanitation		Caritas (CCCM/Emergency Shelter, Food Security)
& Hygiene, and Nutrition	UNICEF (Education,	Catholic Relief Services (CCCM/Emergency Shelter, Food
Sectors)	Nutrition, WASH, Gender &	Security, Nutrition, Early Recovery & Livelihoods)
	Protection, Health,	Child Fund Australia (Food Security, Nutrition, Gender &
Ministry of Public	CCM/Emergency Shelter,	Protection, Education, Early Recovery & Livelihoods)
Works/BEE Timor-Leste,	Food Security, Logistics)	Commission on the Rights of the Child (Gender &
(WASH Sector)	•	Protection)
		Cooperativa Café Timor (CCT) (Food Security)

Ministry of Social Solidarity & Inclusion (MSSI) (CCCM/Emergency Shelter, Gender & Protection, Logistics)

Ministry of State Administration (Early Recovery & Livelihoods)

National Directorate for Community Conflict Prevention (DNPCC) (Gender & Protection)

National Services of Ambulance and Medical Emergency (SNAEM), I.P. and SSM Dili (Health)

National Police of Timor-Leste (PNTL) (Gender & Protection)

Secretary of State for Civil Protection (CCCM/Emergency Shelter, Early Recovery & Livelihoods, Logistics, Food Security)

Secretary State for the Promotion of Equality and Inclusion (SEII) (Gender & Protection)

Secretary State for Training and Employment (SEFOPE) (Early Recovery & Livelihoods) **UN Women** (Gender & Protection, Early Recovery & Livelihoods)

**WFP** (Logistics, Food Security, Nutrition, WASH)

**WHO** (Health, WASH, nutrition)

**Criuz Vermelha (CVTL)** (CCCM/Emergency Shelter, WASH. Health)

Deutsche Gesellschaft fur Internationale Zusammenarbeit (GIZ) (Food Security) Embassy of Australia (Food Security) Embassy of China (Food Security) Embassy of Japan (Food Security)

Embassy of New Zealand (Food Security)
Embassy of Portugal (Food Security, Education)
Engineers Without Borders (EWB) (WASH)

**European Union (EU)** (Food Security, Health) **Fundasaun Alola** (Nutrition)

Fundasaun hafoun Timor-Leste (FHTL) (WASH)

**Fundacao Oriente** (Gender & Protection **FOKUPERS** (Gender & Protection)

**Help and Nurture Developing Societies (HANDS)** (Education)

Health Alliance International (HAI) (Health, Gender & Protection)

**Hivos Timor-Leste** (Food Security)

Japan International Cooperation Agency (JICA) (WASH, Food Security, Early Recovery & Livelihoods)

**Korea International Cooperation Agency, KOICA** (Food Security)

Maluk Timor (Nutrition, Health, Gender & Protection)

Marie Stopes Timor-Leste (MSTL) (Health)

**MDF NLC** (Food Security)

Mercy Corps (CCCM/Emergency Shelter, WASH, Food Security, Gender & Protection, Early Recovery & Livelihoods)

Oxfam (Food Security, CCCM/Emergency Shelter, Gender & Protection, Early Recovery & Livelihoods, Logistics)
Partisipa (WASH)

**Partnership for Humanitarian Development (PHD)** (Nutrition)

Plan International (Education, CCCM/Emergency Shelter, WASH, Food Security, Gender & Protection, Early

Recovery & Livelihoods, Logistics)

PRADET (Health, Gender & Protection)

Programa Monitorizasaun Sistema Judisiál (JSMP)

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(Gender & Protection)

Rede Feto (Gender & Protection)
Saude Ba Ema Hotu (SABEH) (Health)

**Scouts** (Gender & Protection)

**Sustainable Agriculture Productivity Improvement** 

Project (SAPIP) (Food Security)

The Asia Foundation (CCCM/Emergency Shelter, Food

Security, Gender & Protection (Nabilan)

Timor-Leste Coalition for Education (TLCE) (Education)

Timor-Leste Police Development Programme (TLPDP)

(Gender & Protection)

**Timor-Leste Red Cross Society & IFRC** 

(CCCM/Emergency Shelter)

To'os ba Moris Di'ak (TOMAK) (Food Security, Nutrition)

**United States Agency for International Development** 

(USAID) (Food Security)

WaterAid (WASH)

World Bank (Food Security)

World Fish (Food Security)

World Vision (CCCM/Emergency Shelter, Food Security, Nutrition, Gender & Protection, Education, Logistics)

# **Sector Contact Details**

Sector	Government Leads / Focal Points	UN Co-Leads / Focal Points	NGO Co-Leads / Focal Points
CCCM / Emergency Shelter	Civil Protection: Ismael da Costa Babo, Mob:77720095 Email: idacostababo@gmail.com  Agostinho Cosme Belo 77326917 agostinhocosme.belo@gmail.com  DNGRD Mariano Ana Lopes, 77123759  Line Ministries Ministry of Social Solidarity and Inclusion (MSSI), National Police of Timor-Leste (PNTL), F-FDTL	Luis Pinto, IOM, Ippinto@iom.int  Cecilia McIntosh, IOM, cmcintosh@iom.int	Annie Sloman, Oxfam annies@oxfam.org.au
WASH	Civil Protection DNB Claudio da Silva, 77312396  Line Ministries Ministry of Public Works (MOP) Bee Timor-Leste (BTL) Ministry of State Administration	Apolonia Barreto, UNICEF Apbarreto@unicef.org	Ali Saikal, Partisipa ali.saikal@partisipa.tl  Alvaro Ribeiro, Partisipa alvaro.ribeiro@partisipa.tl  Aleixo Santos, Plan International Aleixo.santos@plan- internaitona.org

Sector	Government Leads / Focal Points	UN Co-Leads / Focal Points	NGO Co-Leads / Focal Points
Gender & Protection  1. GBV Sub- Group 2. Child Protection Sub-Group	Civil Protection DNSPPP Francisco Soares da Silva, 77304305 DNPCC Antonio Viegas, 77326404  Line Ministries MOD-FFDTL, MOI-PNTL, Secretary State of Equality and Inclusion (SEII), Ministry of Social Solidarity and Inclusion (MSSI)	Wai Shan (Flora) Chan, UN Women Wai.Chan@unwomen.org  Gizela Moniz Da Silva, UNICEF gmdasilva@unicef.org  Katya Castillo, UNFPA kcastillo@unfpa.org  Gizela Moniz Da Silva & Paula Vargas, UNICEF gmdasilva@unicef.org pvargas@unicef.org	Pauline Tweedie, The Asia Foundation Pauline.tweedie@asiafou ndation.org
Food Security	Civil Protection DNGRD Hermelinda, 78141713 DNSPPP Rogerio A., 77925445  Line Ministries Ministry of Agriculture and Fisheries (MAF)	Ash Rogers, WFP Ash.Rogers@wfp.org  Benjamin Banda, WFP Benjamin.Banda@wfp.org  Paula Lopes da Cruz, FAO Paula.LopesdaCruz@fao.org  Annie Sloman, Oxfam annies@oxfam.org.au	Annie Solman, Oxfam annies@oxfam.org.au
Nutrition	Civil Protection DNPCC: Antonio V., 77326404  DNSPPP Abel M., 77555483, 77326420  Line Ministries Ministry of Health (MoH), Ministry of Agriculture and Fisheries (MAF)	Faraja Chiwile, UNICEF, fchiwile@unicef.org	Evangelita Pereira, World Vision  Evangelita_pereira@wvi.or g

Sector	Government Leads / Focal Points	UN Co-Leads / Focal Points	NGO Co-Leads / Focal Points
Health	Civil Protection DNB Claudio da Silva, 7731296  Line Ministries Ministry of Health (MoH), Servisu Nacional Ambulancia no Emerjensia Medika (SNAEM), IP	Luis dos Reis, WHO, reisl@who.int	Xylia Ingham, Health Alliance International (HAI) xylia.ingham@hai-tl.org
Education	Civil Protection  DNPCC Antonio V., 77326404 DNB Urbano V., 77304008  Line Ministries Ministry of Education, Youth and Sport (MoEYS)	Ameena Mohamed Didi, UNICEF, amdidi@unicef.org  Fatima Soares, Plan International Fatima.Soares@plan-international.org	Joaojinho Noronha, ChildFund jnoronha@childfund.org.a u  Maria Armento, Plan International, maria.sarmento@plan- international.org
Livelihoods / Early Recovery	Civil Protection DNPCC Antonio V., 77326404 DNGRD Serafin da C., 78141712 DNSPPP Gustavo J.L., 77304315  Line Ministries Ministry of Finance (MoF), Ministry of State Administration, SEFOPE, Ministry of Agriculture & Fisheries (MAF)	Lazima Onta Bhatta, UNDP lazima.ontabhatta@undp.org  Youngchan Kim, UNDP youngchan.kim@undp.org  Domingos (Leqsi) Siga Maria, UNDP domingos.sigamaria@undp.org	Kristien Mandala, Mercy Corps, kmandala@mercycorps.or g
Emergency Logistics	Civil Protection DNGRD Hermelinda P., 78141713 DNSPPP Rogerio A., 7792445	Louis Boshoff, louis.boshoff@wfp.org	

# Flood Response Plan - Summary of Priority Response Activities

Sector	Activity	Immediate or Short- term	Funding Gap (USD)	Implementing Partners
CCCM / Emergency Shelter	<ul> <li>Provide emergency shelter items and NFIs to displan households residing in evacuation centers in Dili</li> </ul>	ced Immediate	100,000	Civil Protection and Sector Partners
CCCM / Emergency Shelter	<ul> <li>Provide NFI kits in accordance with Sector and Civil guidance to replace lost and damaged household go</li> </ul>		300,000	Civil Protection and Sector Partners
CCCM / Emergency Shelter	<ul> <li>Conduct regular real-time monitoring of evacuation and sucos, including maps, locations, demographics and intentions of displaced persons.</li> </ul>		50,000	Civil Protection, AHP, CVTL and IOM
CCCM / Emergency Shelter	<ul> <li>Support people to repair their damaged houses thro provision of shelter kits (tools and materials or thro</li> </ul>		150,000 250,000	Civil Protection and Sector Partners
CCCM / Emergency Shelter	<ul> <li>Provide material and technical support for the consortemporary shelter solution for people whose houses completely destroyed, or who reside in areas considunsafe for return.</li> </ul>	have been	100,000	Civil Protection and Sector Partners
CCCM / Emergency Shelter	<ul> <li>Support and provide hands-on training on building b construction with the tool and materials kits provide</li> </ul>		100,000	Civil Protection, AHP, CVTL and IOM
CCCM / Emergency Shelter	<ul> <li>In close coordination with the Livelihoods and Early sector, support in the provision of cash-based assis support people's recovery.</li> </ul>		100,000	Civil Protection and Sector Partners
CCCM / Emergency Shelter	<ul> <li>Continue to promote community-based hazard awar preparedness and Disaster Risk Reduction (DRR) the the response and support links to community-based and development work.</li> </ul>	oughout	50,000	Civil Protection, AHP, CVTL and IOM
WASH	<ul> <li>Distribution of life saving supplies and services (bot evacuation facilities and to affected households)</li> </ul>	h to Immediate	500,000	Civil Protection and Sector Partners
WASH	Construction of interim sanitation infrastructure	Immediate	350,000	Civil Protection and Sector Partners
WASH	Hygiene promotion	Immediate	70,000	MoH and Sector Partners
WASH	Water treatment and safe water storage mechanism	s Immediate	600,000	MoPW-BEE TL and Sector Partners
WASH	<ul> <li>Prevent potential water-borne disease outbreaks in affected communities through community mobilizat WASH behavioral change communication, as well as provision of soap, hand sanitizers and infection prev control supplies.</li> </ul>	ion for the	50,000	MoH and Sector Partners
WASH	<ul> <li>Improve WASH services in affected health centers, t improvement of drinking water safety and quality,</li> </ul>	hrough the Short-term	600,000	MoE, MoH, MoPW – BEE

		rehabilitation of water supply facilities, water storage, gender- sensitive sanitation facilities and provision of handwashing stations with soaps.			TL and Sector Partners
WASH	•	Improve and upgrade WASH facilities in health stations to address urgent needs, particularly for children.	Short-term	1,000,000	MoE, MoH, MoPW – BEE TL and Sector Partners
WASH	•	Promote fecal waste management and provide guidance on improving latrines after the flooding.	Short-term	700,000	MoPW-BEE TL and Sector Partners
WASH	•	Promote community engagement and hygiene practices based on deeper contextual understanding of the social and cultural norms, to determine the public health risks, design and communicate Information, Education and Communication (IEC) materials, track disease trends related to disasters; apply COVID-19 preventive methods (e.g. handwashing, maintaining a safe distance and face mask-wearing.)	Short-term	100,000	MoH and Sector Partners
Gender & Protection	•	Ensure children and women access essential GBV and Child Protection prevention and response services through a strengthened GBV and child protection referral networks, services and coordination of the available Social Welfare and Legal Services provisions as well as community-based approaches; raise awareness around vulnerable groups' rights to live safely and protected, enhance family support, including information dissemination sessions by police <sup>19</sup>	Immediate	30,000	UNICEF-MSSI- VPU
Gender & Protection		Advocate and ensure that the needs of vulnerable and marginalized groups are included in the relief supplies distribution and cash transfer programme; representation of women, children and vulnerable groups in Response Task Forces and in the design, implementation and monitoring of the response; distribution of basic needs and essential services are done as per consultation with the vulnerable groups to prevent violence, abuse, neglect and exploitation	Immediate	10,000	UNICEF-MSSI- NGOs
Gender & Protection	•	Provide dignity kits to women and girls in COVID-19 isolation facilities	Immediate	15,000	UNFPA
Gender & Protection	•	Implement community-based mental health and psychosocial support that offers children and adolescents free and structured play, recreation, and leisure activities packaged to support children's mental health through Child-Friendly Spaces (CFS) in affected communities	Immediate	30,000	UNICEF-MSSI- NGOs
Gender & Protection	•	Strengthen Specialized Mental Health and Psychosocial Support referral pathways for women, children, and survivors of violence and trauma, including families and other vulnerable groups in affected areas	Immediate	10,000	UNICEF-MSSI- MoH-WHO
Gender & Protection	•	Support parents' mental health through parent safe space, supporting parents to learn positive stress coping mechanisms and parenting skills to help their children	Immediate	20,000	UNICEF-MSSI- Ba Futuro
Gender & Protection	•	Provide Psychosocial Support Programme with distribution of dignity kits for women and COVID-19 Protection Kits to women and children	Immediate	10,000	UNESCO, National Commission

<sup>&</sup>lt;sup>19</sup> This is a support to MSSI Child Protection Officers, GBV Focal Points, Social Technical Staff at Administrative post level and VPU Police

					for UNESCO Timor-Leste
Gender & Protection	•	Develop and distribute parenting key messages, child protection and prevention of sexual exploitation and abuse during aid provisions and training aid worker around child protection and Protection from Sexual Exploitation and Abuse (PSEA)	Immediate	20,000	UNICEF- UNFPA-PNTL- JU's
Gender & Protection	•	Provide food items and essential non-food items (NFI) to pregnant women, children, elderly, members of LGBTQI, PwD and HIV/AIDs including maternity and household kits, improvement of lighting in evacuation areas and toilets, personal torch to be used at times of power off, hand sanitizers and face masks to protect them from COVID-19	Immediate	1,278,270	MSSI
Gender & Protection	•	Ensure integration and mainstreaming of gender and protection principles across the response through the provision of technical support to different sectors; contextualize the Child Protection Minimum Standard in Humanitarian Settings in Timor-Leste with the support of IASC and training the Child Protection Sub-Sector members	Immediate	20,000	UNICEF-MSSI-
Gender & Protection	•	Provide technical assistance and training on Psychological First Aid and the MHPSS tool kit to caregivers of residential care facilities, child protection officers, social animators, GBV focal points, teachers, community nurses or workers and services providers; continue provision of mental health and psycho-social support to children and parents in the affected areas	Short-term	50,000	UNICEF-MSSI- Residential Care Facilities
Gender & Protection	•	Review and revise case management policy for child protection in emergency and support to case management process of the survivor of women and child GBV survivors, including home visits and virtual follow up support <sup>20</sup>	Short-term	30,000	UNICEF-MSSI- NGOs
Gender & Protection	•	Integrate emergency response and coordination in Social Welfare Workforce Capacity development including developing an accredited community based MHPSS workforce training programme for Social Welfare and Community Health Workers	Short-term	40,000	UNICEF-MSSI- MoH-academic partner
Gender & Protection	•	Register all children in Institutional Care Facilities to identify children separated from families due to emergency and provide the support that promotes their development, family connection, reintegration and wellbeing in the family	Short-term	10,000	UNICEF-MSSI and partners
Gender & Protection	•	Improve baseline data and data collection to inform programming and coordination, including mapping of services and information management system	Short-term	20,000	UNICEF-MSSI
Gender & Protection	•	Support to renovate WASH facilities at five residential care institutions with lighting and privacy and ensure that they are disability friendly	Short-term	25,000	UNICEF-MSSI
Gender & Protection	•	Provide nutritious food for families with PwD	Short-term	750,000	MSSI
Food Security	•	Distribution of 20,000 MT of rice to 12 municipalities incl. RAEOA (transport and insurance)	Immediate	500,000	National Logistics Center

 $<sup>^{20}\</sup> Support\ to\ MSSI\ Child\ Protection\ Officers,\ GBV\ Focal\ Points,\ and\ Social\ Technical\ staff\ at\ Administrative\ Post\ level\ to\ work\ with$ families and services.

Food Security	•	Logistics support to National Logistics Center	Immediate	500,000	National Logistics Center, WFP
Food Security	•	Purchasing of farming equipment (hoses, irrigation units, excavators, etc.)	Immediate	300,000	Ministry of Agriculture and Fisheries
Food Security	•	Purchasing of quickly growing vegetable seeds	Immediate	250,000	Ministry of Agriculture and Fisheries
Food Security	•	Replacement of damaged food stocks (beans 4,250 kg; red beans 2,200 kg; corn 1,250 kg; wheat 1,999 kg; sugar 500 kg)	Immediate	25,625	Ministry of Agriculture and Fisheries
Food Security	•	Strengthening Government Supply Chain Capacity	Short-term	500,000	National Logistics Center, WFP
Food Security	•	Warehouse management and rehabilitation	Short-term	1,000,000	National Logistics Center, WFP
Food Security	•	Procurement of fortified rice	Short-term	2,500,000	National Logistics Center
Food Security	•	Repair and rehabilitation of 17 irrigation channels affected by floods	Short-term	5,000,000	Ministry of Agriculture and Fisheries
Food Security	•	Support to food production through mechanization (hand-tractors, cereal processing equipment)	Short-term	1,000,000	Ministry of Agriculture and Fisheries
Nutrition	•	Implementation of comprehensive nutrition programme, including essential nutrition actions	Immediate	25,000	MoH, Nutrition Sector Partners
Nutrition	•	Supplementary food distribution for Moderate Acute Malnutrition (MAM) cases	Immediate	50,000	MoH, WFP, UNICEF
Nutrition	•	Identification and referral of Severe Acute Malnutrition (SAM) cases to nearest operational health centers	Immediate	40,000	MoH, WHO, UNICEF, Fundasaun Alola, MalukTimor
Nutrition	•	Treatment of malnutrition cases	Immediate	105,000	MoH, WHO, UNICEF, and WFP
Nutrition	•	Management of acute malnutrition targeting about 90 % of severely malnourished children 6-59 months.	Immediate	30,000	MoH, WHO, UNICEF
Nutrition	•	Prevention of acute malnutrition by undertaking protection, promotion and support activities for infant feeding in emergencies to 1,040 pregnant and 1,420 breastfeeding women, distribution of micronutrients powder (MNP) to 1,820 children of 6-23 months and supplementation of Vitamin A and routine deworming to reach 1,200 for 6-59 children, and iron folate will reach 1,040 pregnant women.	Immediate	50,000	MoH, WFP, UNICEF, WHO, Fundasaun Alola, MalukTimor
Nutrition	•	Scale up the implementation of provision of nutritious food for children under the age of five and pregnant and breastfeeding women.	Immediate	30,000	MoH, Nutrition Sector Partners
Nutrition	•	Micronutrient supplementation	Immediate	40,000	MoH, UNICEF and WFP

Nutrition	•	Awareness raising including distribution of IEC materials related to nutrition, hygiene and Infant and Young Children Feeding	Immediate	30,000	MoH, WFP, UNICEF, WHO, Fundasaun Alola, MalukTimor
Nutrition	•	Strengthen coordination with food security, health, education, child protection and WASH.	Immediate	6,000	MoH, UNICEF, and WFP
Nutrition	•	Provide necessary guidance and technical support to resume regular and essential nutrition services and support of recovery of nutrition services in affected communities.	Short-term	14,000	MoH, WFP, UNICEF, WHO, Fundasaun Alola, MalukTimor
Nutrition	•	Provide nutrition supplements, especially micronutrients for targeted pregnant and lactating women, children with disabilities, priority given to families with under-5 children.	Short-term	150,000	MoH, WFP, UNICEF, WHO
Nutrition	•	Conduct screening, referrals provide timely treatment and follow-up of cases suffering from SAM in the affected population.	Short-term	350,000	MoH, WFP, UNICEF, WHO, Fundasaun Alola, MalukTimor
Nutrition	•	Conduct awareness campaigns on regular screenings for the detection of SAM and MAM for a timely-triggered response.	Short-term	150,000	MoH, WFP, UNICEF, WHO, Fundasaun Alola, MalukTimor
Nutrition	•	Monitor and manage the donations of breastmilk substitutes and support Infant and Young Child Feeding (IYCF) counselling.	Short-term	136,000	MoH, WFP, UNICEF, WHO, Fundasaun Alola
Nutrition	•	Continue to monitor the pattern of childhood diseases (diarrhea, acute respiratory infection) and impact on acute malnutrition.	Short-term	140,000	MoH, WFP, UNICEF, WHO, Fundasaun Alola,
Nutrition	•	Monitor the intervention coverage and technical compliances of the intervention.	Short-term	60,000	MoH, Nutrition Sector partners
Health	•	Rehabilitate affected health facilities	Immediate Short-term	50,000 200,000	WHO, MoH
Health	•	Strengthen diseases surveillance through integrated medical care services and control of communicable and chronic/non communicable diseases and mental health and psychological support	Immediate Short-term	75,000 200,000	WHO, MOH, NGOs
Health	•	Strengthen vector-borne disease control through dengue control and community mobilizations	Immediate Short-term	50,000 200,000	WHO, MoH, CVTL, NGOs
Health	•	Improve WASH through promoting water safety plans, sanitation and handwashing in collaboration with WASH sector	Immediate Short-term	25,000 75,000	WHO, MoH, UNICEF
Health	•	Provide emergency medicines, ORS, PPE kits, DDK, IEHKs, MCKs, impregnated long lasting nets, reagents, laboratory equipment, and other health kits	Immediate Short-term	225,000 375,000	WHO, MoH, UNICEF

Health	•	Improve sexual and reproductive health through delivery of maternal health kits and dignity kits, PEP kits for specific	Immediate	50,000	UNFPA, MoH, HAI, MSTL
		needs of women, children and disabled persons	Short-term	150,000	
Health	•	Improve maternal and child health including IMCI and immunization	Immediate	280,000	UNICEF, MoH
			Short-term	710,000	
Education	•	Setting up of temporary learning spaces, including temporary WASH facilities	Immediate	100,000	MoEYS, UNICEF, Plan Int'l, Sector Partners
Education	•	Provision of materials for learning activities in shelters	Immediate	100,000	MoEYS, UNICEF, Plan Int'l, Sector Partners
Education	•	Provision of home-based learning materials, and guidance for parents as appropriate	Immediate	100,000	MoEYS, UNICEF, Plan Int'l, Sector Partners
Education	•	Cleaning of schools affected by flooding	Immediate	50,000	MoEYS, UNICEF, Plan Int'l, Sector Partners
Education	•	Cleaning and rehabilitation of schools used as evacuation centers	Immediate	50,000	MoEYS, UNICEF, Plan Int'l, Sector Partners
Education	•	Psychosocial support for children and teachers	Immediate	50,000	MoEYS, UNICEF, Plan Int'l, Sector Partners
Education	•	Back to School Campaign	Immediate	50,000	MoEYS, UNICEF, Plan Int'l, Sector Partners
Education	•	Provision of take-home rations (nutritious food baskets) to students in affected schools	Short-term	100,000	MoEYS, WFP, Sector Partners
Education	•	Renovation and rehabilitation of school buildings before reopening of schools	Short-term	500,000	MoEYS, UNICEF, Plan Int'l, Sector Partners
Education	•	Construction of temporary/emergency classrooms and WASH facilities (incl. sex segregated toilets)	Short-term	1,000,000	MoEYS, UNICEF, Plan Int'l, Sector Partners
Education	•	Procurement of furniture and equipment to meet short-term needs	Short-term	500,000	MoEYS, UNICEF, Plan Int'l, Sector Partners
Education	•	Printing and distribution of textbooks and teaching/learning materials to schools and learning centers	Short-term	500,000	MoEYS, UNICEF, Plan Int'l, Sector Partners

Early Recovery & Livelihoods	•	Direct (unconditional) cash-transfers to support affected households and communities including farmers, fishing communities, and SMEs; accountability mechanisms in place for monitoring and reporting	Immediate	2,000,000	MAF, Mercy Corps
Early Recovery & Livelihoods	•	Various inputs for the affected farmers (e.g. horticulture training, seeds, livestock that were lost, fertilizers, fodder production, animal health, pest control, farming tools)	Short-term	400,000	Plan International, ADRA
Early Recovery & Livelihoods	•	Purchasing fishing equipment, medium sized and small boats, nets, purchasing motors for boats	Short-term	350,000	MAF, CVTL
Early Recovery & Livelihoods	•	Rehabilitating the agricultural lands that were flooded (could be cash for work)	Short-term	200,000	MAF
Early Recovery & Livelihoods	•	Restoring the fishponds that got damaged and repairing fishing boats and fishing equipment (could be cash for work)	Short-term	200,000	MAF
Early Recovery & Livelihoods	•	Restoring green spaces, public parks that got damaged, and planting trees in inland and coastal areas (which could be done through "cash for tree" scheme or cash for work modality)	Short-term	200,000	Secretary of State of Environment
Early Recovery & Livelihoods	•	Community based reforestation and conservation (in 10 Sucos: Tasi tolu, Maloa, Mota Ulun Bekora, Lahana, Manleuana, Beduku, Bidau, Metiaut, Bekusi, Balide)	Short-term	70,000	Secretary of State for Environment
Early Recovery & Livelihoods	•	Ocean and coastal areas clean-up	Short-term	20,000	Secretary of State for Environment
Early Recovery & Livelihoods	•	Construction of Biopori center and 200 biopori holes	Short-term	14,000	Secretary of State for Environment
Early Recovery & Livelihoods	•	Cleaning up beaches and neighborhoods, removing debris, and rehabilitation of community infrastructures such as water facilities, small irrigation facilities, community centers, food storage or warehouses, market sheds, drainage, pavements, fishponds, etc. (cash for work modality)	Short-term	2,000,000	UNDP, SEFOPE, (MSA)
Early Recovery & Livelihoods	•	Creation of water catchment areas on mountain tops for rainwater harvesting and watershed management in river basins (this activity is from the proposal from SSE)	Short-term	40,000	Secretary of State for Environment
Early Recovery & Livelihoods	•	Support the SMEs that were affected (through financial products that can help them to bounce back and continue their business; training in business plans and re-establishing their businesses)	Short-term	250,000	MAF, UNDP, ILO, (MTCI)
Early Recovery & Livelihoods	•	Strengthening the capacity and performance of hydrometeorological observation and warning dissemination	Short-term	20,000	UNESCO, Department of Meteorology & Geophysics under Ministry of Transportation & Communication
Early Recovery & Livelihoods	•	Disaster risk assessment of 5 Sucos (Tasi Tolu, Becora, Lahane, Bairopite, Komoro)	Short-term	5,000	Secretary of State for Environment

Early Recovery & Livelihoods	•	Inspection teams from Civil Protection to evaluate reconstruction and determine risk for vulnerability	Short-term	500,000	Civil Protection
Early Recovery & Livelihoods	•	Coordination, socialization of communities, identification and mapping for final report	Short-term	25,000	Ministry of Justice
Early Recovery & Livelihoods	•	Development of job/livelihood strategy that bridges emergency job creation to medium and long-term sustainability and disaster resilience	Short-term	50,000	ILO, SEFOPE
Early Recovery & Livelihoods	•	Supporting Linkages of Emergency Job Livelihood Programmes to Existing Social Protection Structures (so as to respond and protect against future shocks)	Short-term	40,000	ILO, MSSI
Emergency Logistics	•	Provide logistics services (inclusive of transportation, supply chain planning, and warehousing) in support of the sectoral flood response	Immediate	30,000	Civil Protection, WFP
Emergency Logistics	•	Maintain national logistics coordination mechanisms in support of humanitarian actors	Immediate	60,000	Civil Protection, WFP
Emergency Logistics	•	Enhance the logistics capacity of Government and humanitarian partners through logistics and preparedness trainings, as well as in the provision of necessary equipment	Short-term	10,000	Civil Protection, WFP