



Timor-Leste: Floods

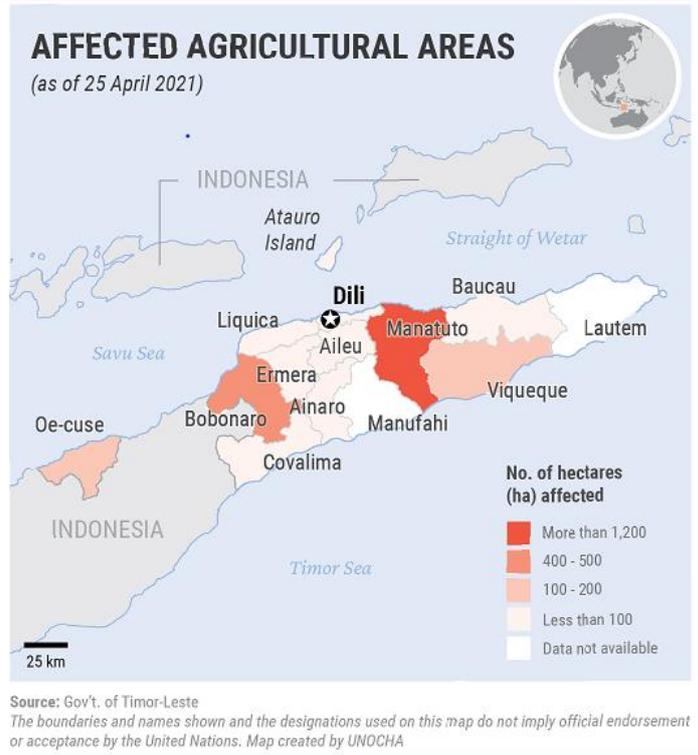
UN Resident Coordinator's Office (RCO)

Situation Report No. 7 (As of 28 April 2021)

This report is produced by UN RCO Timor-Leste in collaboration with humanitarian partners. It is issued by UN Timor-Leste. It covers the period from 22 to 28 April 2021. The next report will be issued on or around 5 May 2021.

HIGHLIGHTS

- Since the declaration of a state of calamity in Dili on 8 April, the Government continues to lead the response operation. On 23 April, the National Parliament approved the amendment of the 2021 General State Budget, with an increased allocation to the Contingency Fund from USD 23.8 million to USD 65.2 million
- In solidarity with the Government, the humanitarian partners have provided relief assistance worth nearly USD 10.5 million.
- Latest official figures (28 April) showed that a total of 31,337 households have been affected across all 13 municipalities. A total of 2,163 ha of agricultural area has been reportedly affected by the flooding.
- According to the Secretariat of State for Civil Protection, 3,925 people remain temporary displaced in 25 evacuation facilities across Dili. Some may not be able to return to the areas where they were previously residing.
- Health and WASH-related concerns were raised this week when two children died of suspected diarrhea and acute respiratory infection (ARI) in the flood-affected community of Masilidun in Tasi Tolu on 27 and 28 April.
- Due to the ongoing COVID-19 situation, on 28 April, the President renewed the State of Emergency for another 30 days.



31,337

Total affected households across the country

2,163

Hectares of agricultural areas affected across the country

25

Evacuation Centers in Dili

3,925

People in Evacuation Centers

41

Fatalities

SITUATION OVERVIEW

Heavy rains across the country from 29 March to 4 April have resulted in flash floods and landslides affecting all 13 municipalities in Timor-Leste to varying degrees, with the capital Dili and the surrounding low-lying areas the worst affected. A total of 41 fatalities (including 10 missing, presumed dead) have been recorded.

According to official figures, a total of 31,337 households across the country have been affected; of those, 83% - or 25,928 households – are in Dili municipality. A total of 2,163 hectares of agricultural areas have been affected by the flooding, which would negatively impact food security during the next lean season.

The latest official figures indicate a total of 25 evacuation facilities in Dili municipality, where 3,925 people – or 799 households – are temporary sheltered. This is 2,104 people less compared to one week ago. Majority of the temporary displaced are returning home, and there is need to support the affected people's safe return to the communities.

On 28 April, the President renewed the State of Emergency for another 30 days. As of 28 April, there are 1,073 active cases of COVID-19. The risk of further spread of COVID-19 remains high. The first phase of the national COVID-19

vaccination programme – launched on 7 April - is nearly completed, with a total of 27,868 doses administered across all municipalities, as of 28 April.

GOVERNMENT RESPONSE

On 8 April, the Government declared a state of calamity in Dili for a period of 30 days and requested for international assistance.

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. 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 latter would allow for the Government to respond to the priority needs of the flood-affected communities.

FUNDING

Many humanitarian partners and donors have been supporting the flood response through humanitarian funding and/or repurposing existing resources. In solidarity with the affected people of Timor-Leste, more donors, including the private sector, have been mobilizing resources in support of the flood-affected people.

To date, nearly USD 10.5 million of additional humanitarian funding has been mobilized by donors, UN agencies, the humanitarian community and the private sector, as shown below:



Regular and systematic monitoring of humanitarian funding and information sharing with the Government of Timor-Leste is important to ensure a transparent, efficient, and coordinated humanitarian response.

HUMANITARIAN RESPONSE

In support of the Government efforts, the humanitarian partners continued to assist with the immediate needs of the affected people in Dili municipality and other parts of the country. As the majority of the temporarily displaced people in the evacuation centers – which was 15,876 at its peak – are returning home, the focus of the humanitarian response has expanded from support to those in the evacuation centers to supporting people to return safely to their homes (where possible). Humanitarian partners are also supporting affected communities – both in Dili municipality and in municipalities outside of Dili - with essential food and non-food items, temporary rehabilitation and reconstruction of houses and other public infrastructures, as well as support to ensure that essential services are undisrupted in these communities.

The next phase of the humanitarian response will be support to livelihoods and early recovery, including emergency cash-for-work initiatives, inputs schemes, and infrastructure rehabilitation and reconstruction. At the request of the Government, partners are preparing to support the Government with longer-term recovery planning through a Household and Building Damage Assessment (HBDA), a Post-Disaster Needs Assessment (PNDA), and a Crop and Food Security Assessment

Mission (CFSAM). These assessments aim to provide more comprehensive country-wide information to inform longer-term recovery and reconstruction of flood-affected households, communities and agricultural lands.

CCCM / Emergency Shelter

Sector Lead & Members:

Secretariat of State for Civil Protection, Ministry of Social Solidarity and Inclusion, IOM, CVTL, IFRC, Mercy Corps, CARE, Caritas, Plan International, Oxfam, UNICEF, UNFPA, Catholic Relief Services, The Asia Foundation, World Vision

Needs:

- Based on the findings of the assessments conducted in the 25 evacuation centers still active, and the daily communication with camp managers, the most pressing needs are food, bedding, cooking and WASH equipment, and hygiene and sanitary items for women.
- There is a need for supplies including non-food items for safe temporary shelter, for people whose houses were partially damaged or totally destroyed.
- Construction and cleaning materials are needed to repair, clean or rebuild houses.
- There is a need for support to monitor and assist the returns; close evacuation facilities; and, address the living conditions and needs of those facing protracted displacement in evacuation centers.

Response:

- CCCM/Emergency Shelter sector partners continued to distribute non-food items and supplies to people in the evacuation centers.
- CCCM/Emergency Shelter sector partners continued to distribute cleaning materials to affected people to clean their flooded houses.
- The Secretariat of State of Youth and Sports (SSYS), in partnership with the Alumni Association of the Youth Parliament (APFTL) and other youth organizations, has set up a Youth Action Posku that has mobilized adolescents and youth to clean the streets and help families clean their houses. Both UNICEF and UNFPA have provided support (including cleaning kits, masks and sanitizer, as well as other non-food items for vulnerable families in affected communities).
- Two country-wide assessments are currently being conducted by the Government with the support of partners: the Multi-Sectoral Rapid Needs Assessment and the Household Damage and Needs Assessment. In Dili, the data collection has been completed for 30 of the 36 *sucos* and the sector partners are facilitating the completion of the two assessments.

Gaps & Constraints:

- Absence of gender and age disaggregated data.
- Women not always included in the administration structures of the evacuation facilities.

Water, Sanitation and Hygiene

Sector Lead & Members:

Ministry of Health, Ministry of Public Works/BEE Timor-Leste, Dili Municipality, UNICEF, CVTL, Mercy Corps, Plan International, Partisipa, UNDP, WFP, WHO, Private Sector, WaterAid, JICA, ADRA, FHTL, EWB

Needs:

- There is a need to continuously review the need for water tanks, toilets and washing areas at evacuation centers as they emerge and/or their population sizes change.
- There is a need to continue to provide emergency water supply points in communities with damaged water supply.
- There is need for improved sanitation and hygiene by ensuring the displaced population have access to proper toilet facilities and sensitization on good hygiene practices.
- There is a need to intensify monitoring of the WASH resources provided.
- There is a need to strengthen sectoral coordination and information sharing.
- There is a need to mobilize additional resources to support WASH sector response in municipalities outside of Dili.
- In the longer-term, there is a need to maintain the flood-affected people's access to routine WASH services.

Response:

70+

Water Tanks installed in evacuation facilities and in water-stressed affected communities

- WASH sector partners provided emergency WASH services and increased access to water and sanitation of flood-affected people, including installation of water tanks, handwashing stations and mobile toilets and rehabilitate WASH facilities in the evacuation facilities and in public areas. Over the reporting period, with WASH sector partners' support, the displacement sites and communities were provided with access to clean water (refilling installed water tanks, re-establishment of water supply systems to affected communities etc.).
- WASH sector partners provided emergency WASH supplies.
- WASH sector partners strengthened communication for behavior and social change around good hygiene practices.
- WASH sector partners provided support to BEE TL, EP to construct a floating raft, a solution to bring clean water to the marooned communities in Tasi Tolu.

Gaps & Constraints:

- Insufficient data and information on the affected population, particularly those in remote hard-to-reach areas, including lack of disaggregated data.
- Need to respond quickly to fast changing needs.
- Limited availability of required WASH supplies in the local market and high cost of those that are available.
- Funding gap for both immediate and longer-term response, including for disaster mitigation measures.

Food Security

Sector Lead & Members:

WFP, FAO, UNDP, UNICEF, World Bank, Mercy Corps, CRS, World Fish, Care International, TOMAK, Oxfam, World Vision, Plan International, Blue Ventures, AVANSA, Child Fund, Caritas, CCT, The Asia Foundation, ADRA, MDF, AI-Com, Ministry of Agriculture, Secretariat of State for Civil Protection, SAPIP, NLC, Embassy of New Zealand, Embassy of Australia, JICA, USAID, Embassy of Portugal, GIZ, EU, ADB, Embassy of Japan, KOICA, Embassy of China

Needs:

- There is an urgent need to meet the food and nutrition security needs of the vulnerable groups – namely under-5 children and pregnant and lactating women –in the evacuation centers and in the affected communities.

Response:

- The planned Crop and Food Security Assessment Mission (CFSAM) in 12 municipalities by MFAF with support from FAO and WFP has been postponed for two weeks.
- Plan International continued to support flood-affected people with food and non-items through the Secretariat of State for Civil Protection in the municipalities of Dili, Aileu and Ainaro.
- WorldFish is exploring options to support address the food and nutrition needs of vulnerable groups affected by the floods.

Gaps & Constraints:

- Limited sea transport between Dili-Oecusse has affected food availability and food prices in Oecusse.
- COVID-19 “sanitary fences” and restriction on movement between municipalities has impacted the transportation of food and food availability.

Nutrition

Sector Lead & Members:

Ministry of Health, UNICEF, Ministry of Agriculture, Maluk Timor, Fundsau Alola, PHD, TOMAK, World Vision, CRS, Child Fund, WHO, WFP

Needs:

- The priority need is to 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.

409

Under-5 children
screened for malnutrition

- There is a need to strengthen the quality and scale of preventative nutrition services for most vulnerable groups through promotion of appropriate infant and young child feeding practices, micronutrient supplementation and optimal maternal nutrition.
- With cases of diarrhea starting to be reported in the evacuation facilities and the impact of temporary displacement on food and nutrition security, there is an immediate need to establish a referral system for severe/critical cases of malnutrition.

Response:

- During the reporting period, a total of 409 children in 21 evacuation centers were screened, of whom four children were identified to suffer from severe acute malnutrition (SAM). Treatment was provided by the relevant Community Health Centers.
- Nutrition sector partners continued to support the Nutrition Department/MoH to distribute local food stuff for preparation of diversified complementary food for children 6-59 months and pregnant and lactating women in the evacuation facilities. The food was distributed to 22 evacuation facilities, and replenishment of supplies to the evacuation centers is ongoing. One evacuation center (Maslidun Tasi Tolu) will start implementation of nutrition activities in the coming days.
- UNICEF, WFP, WHO and Fundasaun Alola supported the Nutrition Department/MoH to promote, protect and support infant and young child feeding (IYCF) practices in 18 evacuation centers through establishing an IYCF corner. They continue to distribute cooking utensils and materials for establishment of an IYCF corner in additional 10 evacuation centers.
- A total of 322 mothers (82 pregnant and 240 mothers of children 0-23 months) received counselling for recommended IYCF from the members of MSG deployed to 21 evacuation centers.
- Nutrition sector partners continued to support MoH to monitor adherence to the statement on appropriate support for IYCF during emergency signed by DGPS MoH in the evacuation centers and take necessary actions including onsite counseling.

Gaps & Constraints:

- Concern over private donations of bottles, breastmilk substitute and highly processed food items that are high sugar, salt and fat content).

Health

Sector Lead & Members:

Ministry of Health, WHO, UNICEF, UNFPA, IOM, Maluku Timor, PRADET, HAI, CVTL, MSTL, SABEH (Saude Ba Ema Hotu), DFAT, EU

Needs:

- On 27 and 28 April, two children (aged 4 and 8 months) died due to suspected diarrheal disease and acute respiratory infection (ARI) in the flood-affected community in Masilidun, Tasi-Tolu. The MoH Rapid Response Team is carrying out an investigation, including laboratory testing of water quality in the affected areas.
- There is a need for prevention of acute respiratory infections, water-borne diseases, vector-borne diseases (in particular dengue) and skin diseases.
- There is an urgent need to prevent the spread of COVID-19 in evacuation facilities and amongst other temporary displaced people.
- With loss of medicine and medical supplies due to the floods, there is a need to replenish emergency medical supplies.

Response:

- In response to increased number of water-borne diseases, WHO and the Health Emergency Operations Center (HEOC) of the National Services of Ambulance and Medical Emergency (SNAEM) facilitated a virtual meeting with the Department of Environmental Health/MoH, UNICEF, AHP, HAI and PARTISIPA to discuss treatment of drinking water and water purification targeting in evacuation centers, health facilities and communities affected by the floods.
- The HEOC/SNAEM, with support of Health sector partners, continues to provide essential health services to the affected population through healthcare facilities and mobile health clinics including referral services.

13

MT of medical supplies and equipment brought in to support ongoing response

- WHO chartered a flight and delivered 13 MT of medical supplies and equipment (including PPE, cholera kits, field deployment kits, and, emergency medicines) to support the ongoing response to COVID-19 and the floods.
- Dili Municipality Health Service continued to manage the integrated medical assistance, delivery of health goods and health promotion in evacuation centers.
- WHO continued to strengthen surveillance of communicable diseases prone to outbreaks after a disaster and of other health events.
- WHO together with other Health sector partners continued to conduct rapid health facility assessments in 30 healthcare facilities (government and private) in Dili. Rapid health facility assessments were completed in 100% of healthcare facilities and 75% of evacuation centers in Dili.
- Operational support was provided to Dili Municipality Health Services (DHS) to deliver essential health services to flood-affected children and mothers through mobile clinics.
- WHO trained 20 medical doctors and paramedics of the Timor-Leste Red Cross (CVTL).
- UNICEF continues to provide two rental vehicles to DHS to support distribution of essential supplies, monitoring and supervision until 8 May.
- UNICEF through DHS distributed 35 mother's kits to lactating mothers and mothers of under-5 children in evacuation centers and communities.
- Technical assistance was provided to flood-affected municipalities to analyze assessment report and design intervention to flood-affected children and mothers.
- UNFPA continued to provide dignity kits to evacuation centers and communities in Dili, Hera and Manatuto.
- UNFPA in collaboration with Community Health Centers and Fundasaun Alola provided essential SRH and child health services such antenatal care, post-natal care, family planning counseling and breastfeeding counseling.
- HAI continued to distribute maternity packs to pregnant and breastfeeding women in evacuation facilities.
- HAI midwives were on stand-by to support with mobile clinics or with health assessments.

Gaps & Constraints:

- Lack of medicines, supplies, reagents and equipment to maintain essential services.
- Lack of COVID prevention information in the evacuation centers and affected communities, and non-adherence to COVID-19 pandemic protocols.
- Increasing number of new COVID-19 cases in Dili, resulting in added risk to beneficiaries and emergency response teams.
- Lack of safe drinking water and improper handling of sanitation and waste management that trigger increased number of water-borne diseases, vector borne diseases, acute respiratory infections and skin diseases.
- Funding gaps in priority areas.
- Information on children and mothers who have returned home from evacuation centers.
- Limited data and information from flood-affected municipalities outside Dili.

Gender & Protection

Sector Lead & Members:

MSSI, SEII, UNICEF, UN Women, UNFPA, UNDP, IOM, Rede Feto, CARE, Mercy Corps, Plan International, Arcoiris, Oxfam, Commission on the Rights of the Child, Alola Foundation, Ba Futuru, FOKUPERS, World Vision, Plan International, ChildFund, Scouts, Black Angels, Alumni of Youth Parliament, Fundacao Oriente, The Asia Foundation (Nabilan), TLPDP, Maluk Timor, PRADET, Health Alliance International, ALFeLa & JSMP

1,000

Children benefited from the Child Friendly Spaces

Needs:

- There is a need to ensure that disaggregated data is collected through the needs assessment, including data on children, women, men, pregnant mothers, elderly people, and persons with disabilities (PwDs). Data privacy in assessments must be ensured, as well as safe information sharing to inform needs and responses.
- There is a need to ensure that the diverse needs of children, women and other vulnerable groups (e.g. women and girls with disabilities, pregnant women & lactating women, single-parent mothers, survivors of gender-based violence, persons living in shelters/ institutional facilities, LGBTIQ persons) are taken into consideration in the emergency response, e.g. relief supplies distribution, accessibility and safety of the evacuation centers and healthcare support, as well as in the recovery planning. The floods affect women, men, girls and boys of all ages in different ways. Gender inequalities increase vulnerability of women, girls and vulnerable groups as they limit the equal access to information and resources including clean water, food, menstrual hygiene products, healthcare services, etc.

- There is a need to provide basic sanitation facilities at evacuation centers. For example, it was reported that the temporary displaced in an evacuation center at High School of Technology in Hera were not allowed to use the toilets.
- There is a need to ensure that facilities at evacuation centers are safe and easily accessible by all individuals including girls, women, elderly and PwDs. For example, there is a need to provide separate bathrooms and toilets for women and men, with clear signs at the entrance and adequate lighting (particularly at night). Some evacuation centers are not equipped with lighting devices or with adequate lighting. Privacy protection is essential, and each bathroom or toilet should be able to be locked from the inside. There is also a need to provide a breastfeeding area with adequate privacy at evacuation sites.
- Disasters can have devastating effects on children's lives, and there is a need to ensure that the response takes into consideration the specific needs of children.

Response:

- UN Women, UNICEF and UNFPA provided technical support to ensure that the rapid site assessment of evacuation centers is gender-sensitive and addresses the protection concerns.
- UNICEF and MSSSI printed posters with key messages on child protection and GBV prevention and response, as well as with phone numbers of essential services and referral numbers, mental health support hotline and COVID-19 hotline. The posters were distributed to the evacuation centers.
- During the reporting period, UNDP, UNICEF, The Asia Foundation and other humanitarian partners have been conducting lighting needs assessment and providing lighting devices at some evacuation centers (including Eskola Primaria 5 Comoro and Hera Technical Vocational School).
- UNICEF provided cleaning kits, shovels, masks and hygiene supplies to the Associação Deficientes de Timor-Leste (ADTL) to support seven of its member organizations to clean up their offices, and to further distribute cleaning kits and hygiene supplies to 150 families of persons living with disabilities.
- UNICEF has been supporting the MoH on the operation of the national hotline for mental health. A series of trainings for the operators (MoH staff and external staff contracted by MoH) are being conducted.
- Plan International, together with the Cabinet of First Lady, distributed NFIs to affected communities.

Child Protection Sub-Sector

Led by MSSSI and UNICEF

Members: MSSSI, UNICEF, UN Women, UNFPA, CARE, Commission on the Rights of the Child, Plan International, Arcoiris, Oxfam, Alola Foundation, Ba Futuru, FOKUPERS, World Vision, ChildFund, AIFela, Maluk Timor, PRADET, Nabilan Program, Fundacao Oriente, Scouts, group of volunteers Black Angels, Alumni of Youth Parliament

Needs:

- Evidence often shows that violence is exacerbated in emergencies due to disruption of services and community life, destruction of infrastructure, separation of families and displacement, and limited access referral services. There is a need to take actions from the earliest stages of the emergency to adequately mitigate all forms of violence and safely respond to the needs of potential survivors. Disasters can have devastating effects on children's lives, and there is a need to ensure that the response takes into consideration the specific needs of children.
- Based on the assessment made in the evacuation centers, there are several cases of violence against children and MHPSS needs that must be referred to specialized service and case management. A referral system needs to be functioning in the evacuation centers.

Response:

- The Child Protection sub-sector, under the leadership of MSSSI, established a task force for the Mental Health Psychosocial Support and specialized services, where MSSSI, UNICEF, WHO, National Hospital, PRADET, AIFela, Maluk Timor, and Nabilan program are participating. The first meeting was held on 26 April.
- The Child-Friendly Spaces (CFS), in its third week of implementation, delivered psychosocial support activities for children in 13 evacuation centers, reaching about 1,000 affected children living in the evacuation centers as well as children from the surrounding communities. The CFS provides children with opportunities to access free and structured play, recreation, and leisure package to support children's mental health during situations of crisis or instability. During the reporting period, the programme included activities for both parents and children, and 61 volunteers were trained for the weekly activities with particular emphasis on the referral pathways. In addition, World Vision Timor-Leste handed over recreational kits to MSSSI to support CFS activities in 10 evacuation centers, and ChildFund provided additional recreational materials and reading books for the children in two CFS. In addition, MSSSI and UNICEF deliver materials every week to the volunteers to develop their activities, including the weekly activity guidelines, face masks, and hand sanitizers to reduce the risk on COVID-19. These activities are implemented under the leadership of MSSSI with the technical assistance of UNICEF, with the coordination, support, and participation of Plan International, World Vision,

ChildFund, Alola Foundation, Fokupers, Ba Futuru, Mane ho Vizaun Foun, and youth groups such as Scouts Association, the Alumni of the Youth Parliament, and Black Angel.

- UNICEF and partners supported MSSI to deliver non-food items for children who lost family members and parents during the floods in Manatuto municipality. UNICEF also provided technical assistance to the Child Protection Officers in Manatuto Municipality to support the bereaved children and their families.
- Plan International, managing the CFS at Seminario Canosiano in Hera, assisted the Secretariat of State for Civil Protection in the reintegration of 46 households from the evacuation center back to the community.
- UNICEF and MSSI printed and distributed key Child Protection messages mainly related to parenting and prevention of exploitation and abuse in humanitarian settings.
- UNICEF through its partner Alumni Association of Youth Parliament (APFTL) has initiated life-skills based education (LSBE) for about 200 adolescents in 10 evacuation facilities.

Gender-Based Violence Sub-Sector

Led by UNFPA and UN Women

Members: SEII, UNFPA, UN Women, UNDP, IOM, Rede Feto, The Asia Foundation (Nabilan), World Vision, Plan International, Arcoiris, FOKUPERS, Alola Foundation, TLPDP, Maluk Timor, Health Alliance International

Needs:

- There is a need to provide separate toilets (with locks from the inside, clear signs at the entrance) and adequate lighting at evacuation facilities to address safety concerns.
- There is a need to provide separate rest spaces for women and men at evacuation centers.
- Evidence shows that violence is exacerbated in emergencies due to disruption of services and community life, destruction of infrastructure, separation of families and displacement, and limited access referral services. There is a need to take actions from the earliest stages of the emergency to adequately mitigate all forms of violence and safely respond to the needs of potential survivors. The advocacy on ending gender-based violence is needed, with messages on support or referral services available. The referral of essential services for survivors of violence and the information on relevant services hotlines is needed and should be shared widely.

Response:

- UNFPA developed IEC materials with contact information and hotline numbers of referral services. The posters have been shared widely with the Gender & Protection Sector members and in social media platforms, and they are displayed in the evacuation facilities and in the communities. UN Women, UNFPA, IOM and UNDP, through the Joint UN-KOICA Project *Together for Equality*, are jointly developing some posters as well, which will be distributed at the evacuation centers and on social media.
- ALFeLa and JSMP have been visiting evacuation centers and sharing information on GBV prevention and response and referral phone numbers. They are supporting to monitor security situation in some evacuation centers.
- The PNTL Vulnerable Persons Unit (VPU) are staffed with specialized investigators who are trained to investigate sexual assault, child abuse and domestic violence incidents. There is a VPU in every district. The PNTL VPU investigators are visiting the evacuation centers and provide information and brochures advising how to report GBV cases to the police.

Education

Sector Lead & Members:

Ministry of Education, Youth and Sport, UNICEF (co-lead), Plan International (co-lead), Child Fund, Care International, HANDS, Portuguese Embassy, Oxfam, World Vision, Timor-Leste Coalition for Education (TLCE)

Needs:

- There is an immediate need to address the psychosocial and learning needs of affected children.
- There is an immediate need to provide learning materials, WASH materials and safe drinking water to schools affected by the flooding.
- In the longer term, there is a need to reconstruct and renovate affected schools.

Response:

450

Children in 8 evacuation centers benefitted from learning and play activities

- Learning activities continued in 8 evacuation centers. While the activities were planned for 360 children in the 8 centers, in some evacuation centers children from the surrounding, affected communities also joined the activities. The total number of children participating in the learning and play activities have therefore increased to 450.
- The learning activities are monitored by a team of supervisors from various partner organizations to ensure that children are wearing masks, are adequately physically distanced, and are actively participating in activities.
- A meeting of key focal points from participating organizations was convened and facilitated by UNICEF to debrief on the activities and identify additional needs.
- Additional volunteers were mobilized for these activities, including 6 from FOCO, 7 from Pro-Portuguese and 10 from Plan International. The newly volunteers will receive an orientation in the coming days.
- Assessment of schools were completed, and the findings were presented to MoEYS on 27 April. Approximately 7 schools were damaged by the floods in Dili municipality. MoEYS will start cleaning up the debris in the 7 most-affected schools in the coming days.

Gaps & Constraints:

- Data gaps on the numbers of school-aged children and teachers affected.
- Detailed information on damages and losses in schools not yet available.
- Funding gap for immediate response and for reconstruction and renovation of school buildings and materials.
- Difficulties to mobilize teachers to support flood response interventions in schools due to the ongoing COVID-19 situation.
- Difficult access to some schools in the outskirts of or outside of Dili, due to damaged roads and the sanitary fence.

Early Recovery & Livelihoods

Sector Lead & Members:

UNDP, Secretariat of State for Civil Protection, Ministry of Finance, Ministry of State Administration, SEFOPE, Ministry of Agriculture and Fisheries, UN Women, JICA, Plan International, Oxfam, Mercy Corps, Catholic Relief Services, Child Fund Australia, Adventist Development and Relief Agency, CARE

Needs:

- According to latest official figures, 4,546 houses were destroyed or damaged, 74% of which are in Dili municipality. Nearly 2,163 hectares of agricultural areas were affected and numerous public infrastructures such as roads, bridges, schools etc. were seriously damaged.
- There is a need to support the households whose livelihoods have been affected, including houses that were either partially or totally destroyed.
- There is a need to conduct further assessments on livelihoods needs to support the Government's recovery planning.

Response:

- The household assessment is still ongoing to collect information on household-level damage and needs, led by the Government with support of humanitarian partners.
- Humanitarian and development partners are providing recovery support in the form of non-food items, shelter support, agriculture inputs such as seeds, assistance to social funds/saving groups, prioritizing the most vulnerable.
- Preparatory work is underway for a cash/food-for-work programme in Dili municipality, which will aim to provide flood-affected populations with food and immediate employment opportunities, stimulating local recovery and resulting in cleaned up and livable *aldeias*. Other recovery initiatives, such as provision of building materials to help re-build homes most severely damaged by the floods are under development.
- Discussions continue with the Government on the multi-sectoral Post Disaster Needs Assessment (PDNA) – including sectors such as livelihoods, housing, and others - to inform priorities for recovery planning. Preparation is underway for the UNDP-funded Household and Building Damage Assessment (HBDA), which will input into PDNA.

Gaps & Constraints:

- Demands of various assessments that are simultaneously ongoing, putting a strain on coordination and capacity of various institutions.
- Absence of data, especially in relation to livelihoods.

Logistics

Sector Lead & Members:

WFP, Secretariat of State for Civil Protection, MSSSI, CARE, World Vision, Oxfam, Plan International, UNICEF, UNFPA

246.4

Metric tons of flood relief items transported to the affected population

Response:

- Utilizing the helicopter financed by the Government of Australia and Santos, the Secretariat of State for Civil Protection continued to deliver food, NFIs and medical items to affected communities across Timor-Leste.
- Relief and charter flights by Australia, New Zealand and WHO brought in relief items such as family and hygiene kits, as well as medical supplies and PPEs for the flood and COVID-19 response.
- Due to high demand for transport of humanitarian cargo and passengers, WFP organized a supplementary flight, which arrived in Dili on 28 April.
- To date, WFP has transported 246.4 MT of flood relief items on behalf of Government and humanitarian partners.

Gaps & Constraints:

- Information on access constraints outside of Dili.

GENERAL COORDINATION

The operational coordination of the flood response is led by the Secretariat of State for Civil Protection, who holds daily operational coordination meetings. The UN (IOM, RCO & WFP), AHP partners, and Mercy Corps are supporting the operational coordination role of the Secretariat of State for Civil Protection.

Humanitarian coordination is undertaken through the following sectors, often led/co-led by the Government line ministries, with UN and NGO sector focal points as follows:

Sector	Sector Lead / Focal Point	E-mail
CCCM/Emergency Shelter	Luis Pinto, IOM Cecilia McIntosh, IOM	lppinto@iom.int cmcintosh@iom.int
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Sector coordination meetings are being held. Humanitarian partners are encouraged to contact the Sector Leads/Focal Points, should they wish to be engaged in the sector coordination mechanism.

The UN Resident Coordinator is providing strategic coordination of the UN humanitarian response to the floods, as well as high-level engagement with the Government senior leadership, diplomatic community including humanitarian donors, civil society and the media.

ANNEX - ADDITIONAL RESOURCES

EU Copernicus Emergency Mapping: <https://emergency.copernicus.eu/mapping/list-of-components/EMSR507>
UNOSAT Maps related to Timor-Leste floods: <https://unitar.org/maps/countries/102>

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