

The Displacement Tracking Matrix (DTM) is an information management tool used by the CCCM Cluster to gather baseline information on displaced populations and the conditions in the areas where they have temporarily settled. The DTM has been rolled out in over 20 countries including Haiti, Pakistan, Mali, The Democratic Republic of Congo and the Philippines.

24 APR 2015

I. BACKGROUND

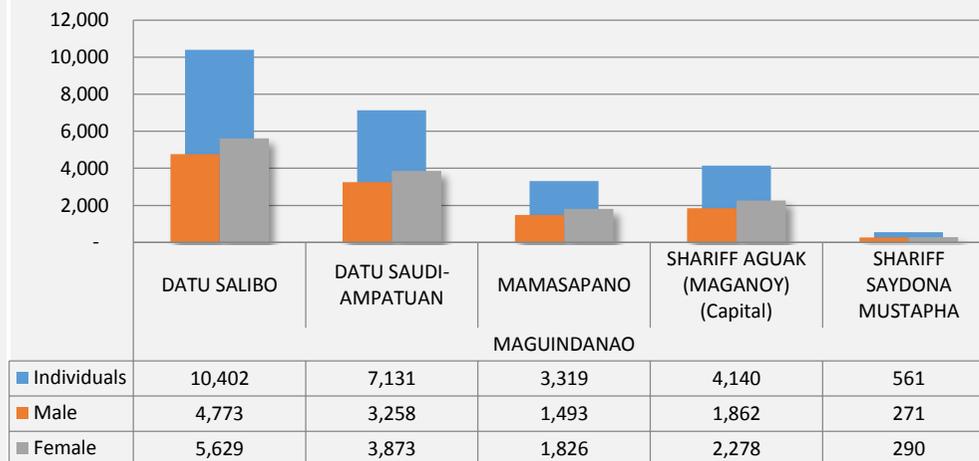
From February to March 2015, a month-long law and order operations lead by the Armed Forces of the Philippines (AFP) against the Bangsamoro Islamic Freedom Fighters (BIFF) left more than 91,000 displaced individuals in 13 municipalities of the province of Maguindanao.

Named SPMS box by the military, the operation focuses on the municipalities of Shariff Saydona, Pagatin (Datu Saudi-Ampatuan), Mamasapano and Shariff Aguak that resulted to displacement of over 25,000 people, fleeing their homes to avoid being caught in a cross fire, in the said municipalities including Datu Salibo.

In close coordination with the local government units, IOM Cotabato has conducted assessment missions in the affected sites to identify the most pressing needs and concerns of the IDPs for possible response and referrals. To date, IOM Cotabato has assessed 18 sites in Maguindanao.

Displacement by Municipality

DTM assessed Sites as of 27 Apr 2015



*56% of the IDPs are currently living in enclosed spaces such as classrooms and mosques.

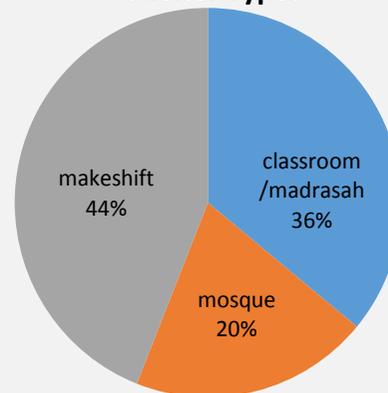
*An equally significant number of IDPs living in makeshift shelters are exposed to greater vulnerability

*All sites are in need of increased CCCM support.

No. of Sites with Referral Mechanisms



Shelter Types



*Referral pathways for all sectoral concerns are lacking in all sites especially for trafficking and SGBV cases



25,553

Total DTM assessed displaced persons



5,746

Total DTM assessed displaced families

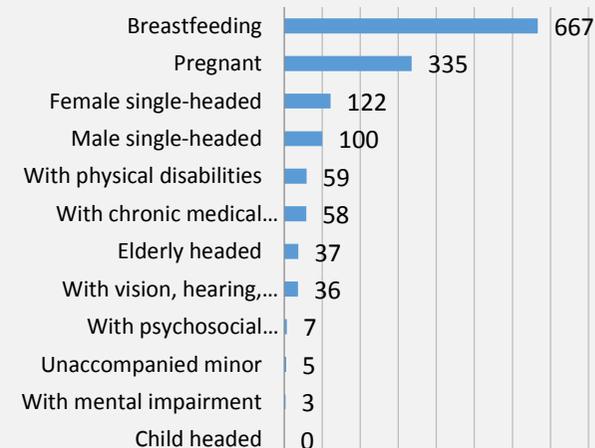


18

Displacement sites assessed

Thirty nine percent of all displaced persons are located in Datu Salibo, where also the most number of evacuation centers are located. Mahad Buayan EC in Datu Saudi-Ampatuan is currently holding the most number of IDPs (4,915 or 19% of all IDPs). The municipality of Datu Saudi-Ampatuan has the highest number of IDPs after Datu Salibo. Fifty-five percent of the IDPs are female.

Persons with Vulnerabilities



*Data shown in the chart above are based from sites with available data on vulnerable groups at the time of data collection.

SECTORAL NEEDS AND CONCERN

<h3>Camp Coordination Camp Management</h3>	<h3>Shelter and Non-Food Items</h3>
<p>Approximately two months after their initial displacement, of the total 18 sites, only eight (40%) were reported to be managed by a government agency or LGU. Likewise, less than fifty percent of displacement sites report to have CCCM support onsite. In conflict situations where displacement is prolonged, increased coordination and management capacities become critical. There is an immediate need for CCCM support to ensure that all sectoral issues and concerns of the IDPs are addressed.</p>	<p><i>Shelter.</i> Forty four per cent of the IDPs are staying in makeshift shelters. These shelters are made of light materials such as coconut leaves, scrap wood and old tarpaulins that offer no safety/privacy features. These rudimentary shelters offer little protection against the elements and can affect the health, safety, privacy and overall well-being of IDPs, especially children, pregnant and breastfeeding women, elderly persons and persons with special vulnerabilities. Majority of shelters in sites do not have protection features such as doors (70%), locks (89%), proper privacy partitions (100%) and basic lighting (78%).</p> <p><i>Non-Food Items.</i> LGUs and other humanitarian agencies have distributed non-food items to the IDPs. Among the most essential non-food items identified are: <i>hygiene kits, mats, mosquito nets, blankets, water containers, and aqua tabs.</i></p>
<h3>Food and Nutrition</h3>	<h3>Health</h3>
<p>The situation is tending towards critical as IDPs are faced with limited options against malnutrition and food insecurity. Food distribution has been reported to be irregular in majority (61%) of displacement sites covering more than 18,000 people. Food security activities such as Food-for-Work remain limited to seven sites. Furthermore, IDPs are inhibited from pursuing their livelihood activities due to the conflict. Malnutrition screening has not been carried out for 51 per cent of the displaced population.</p>	<p>Health referral is available in all but two sites: Mahad Butilen in Datu Salibo and Mahad Libutan in Mamasapano. Capacity to address specific health issues such as those involving SGBV and Psychosocial health is very low across displacement areas: 5 sites (22%) with personnel for SGBV cases and only 2 sites (11%) with personnel for Psychosocial cases. The health issues needing immediate attention in displacement sites are influenza, skin diseases and water-borne diarrhea with 40% of sites reporting cases of diarrhea. Accessibility of health facilities such as health posts as well as capacity of the host medical health unit can affect efforts to address IDP's health concerns.</p>
<h3>Water, Sanitation and Hygiene (WASH)</h3>	<h3>Protection</h3>
<p>Water sources in 50% of displacement sites have not been tested and certified safe for drinking by the local sanitary inspector. Cases of diarrhea have also been reported in a number of sites including in Mahad Buayan, which currently has the most number of IDPs. Sanitation facilities such as latrines and bathing cubicles are severely lacking in all of the displacement sites –94% of sites scoring below Sphere standards. Protective features such as separate male and female cubicles, lockable doors, lighting, as well as assistive devices pose greater risk for children, women and vulnerable groups. IDPs expressed a need for water tanks and additional latrines.</p>	<p>Protection services for women, children and men such as referral pathways, psychosocial services; friendly spaces for women, children and other vulnerable groups are <u>NOT</u> available in 89% of the sites. There is no legal documentation support available for women, men, and children if IDPs lost any personal documents. Also, IDPs have limited access to information about issues related to conditions/status of their return sites. Presence of security personnel patrolling the sites is limited or lacking. In sites where there is security personnel presence, the patrolling activities are irregular. Only two sites have women in the security personnel. Majority of the evacuation centers have very poor lighting. IOM and UNFPA conducted community based orientations on multi-sectoral GBV response in the municipalities of Datu Salibo and Shariff Saydona Mustafa.</p>

The data presented above is based on the DTM results and direct observations during the assessment missions conducted by IOM and DSWD.

For more information, kindly contact:

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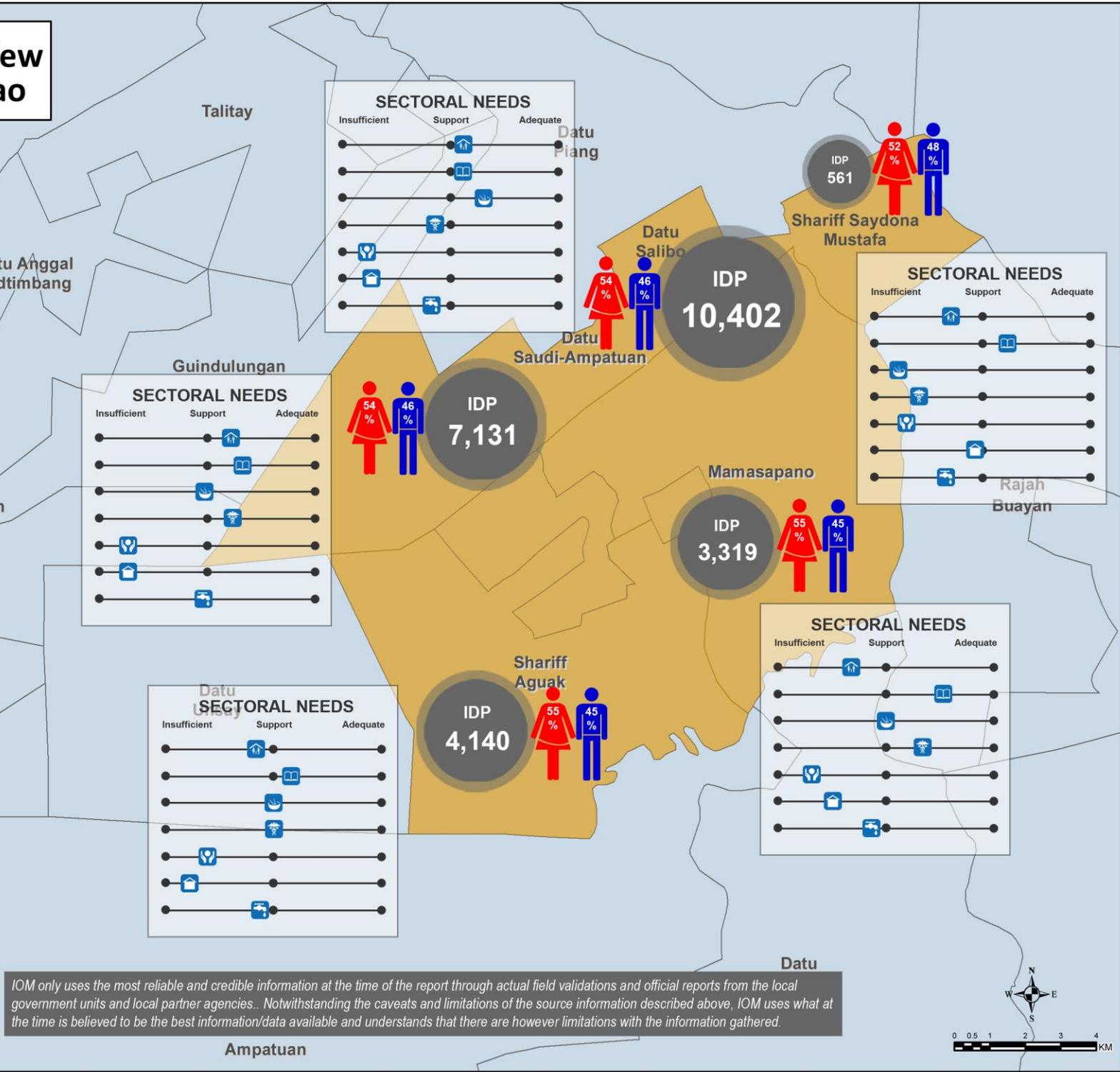
Displacement Overview for Central Mindanao

25,553
Total Individuals

5,746
Total Families

56% (Female) **46%** (Male)

- CCCM
- Education
- Food
- Health
- Protection
- Shelter
- WASH



IOM only uses the most reliable and credible information at the time of the report through actual field validations and official reports from the local government units and local partner agencies. Notwithstanding the caveats and limitations of the source information described above, IOM uses what at the time is believed to be the best information/data available and understands that there are however limitations with the information gathered.

