This six-month Operation Update provides updated information about the situation of people on the move and explains how Red Cross teams have adapted their response to meet evolving humanitarian needs. This update presents information about the current implementation of the Emergency Plan of Action considering that the actual coverage of the Appeal is 26%. Additional funding is needed to support the planned response activities and reach at least 283,000 people throughout the Americas region. Thus far, National Societies have reached a total of 3,782 people in Health and 2,083 people in WASH activities.

Click here for the financial report, and here for the contact information.
A. SITUATION ANALYSIS

Description of the disaster

According to UNHCR, over 3.4 million people have departed from Venezuela to other countries by air, land or sea; with 2.7 million being hosted by countries in Latin America and the Caribbean\(^2\). Over 5,000 Venezuelan nationals cross the different borders in the sub region daily. **Projections estimate 5.6 million Venezuelans will have left the country by December 2019** (1 out of 4 Venezuelans). This is the largest migration from a single country in the region in recent history. As the numbers continue to rise, so do the needs of migrants and host communities.

In addition, some countries have experienced *increased migration flows from extra-regional migrants* particularly from the Caribbean, Asia and Africa. Migrants are a particularly vulnerability segment of the population, as they are exposed to human trafficking, abuse, exploitation and violence. Extra-regional migrants can experience even more acute vulnerabilities compared to regional migrants due to challenges with accessing regular migration status (and subsequently protected work), along with language and cultural barriers\(^3\).

Based on the Quarterly Risk Analysis from ACAPS\(^4\), confrontations and large-scale civil unrest in Venezuela is likely to significantly deteriorate the humanitarian situation, create serious protection concerns for civilians, and trigger further displacement. Migration from Venezuela shows no signs of slowing down, and the continuing influx is likely to keep impacting neighbouring countries, straining capacities and leading to the deterioration of basic services. Potential pushback or change in migration policies from host countries would likely lead to increasing difficulties for Venezuelan refugees to access legal status or gain right to employment.

In addition, *vulnerable migrants who have travelled far outside of their country of origin, who are on route to destination country or have arrived at their final destination, are not likely to make a return to their country of origin in the short to medium term even if vulnerability conditions ameliorate in the country of origin*\(^5\).

This operation seeks funds to reach this population with a range of services that are aimed at preserving the dignity of people on the move and strengthening their wellbeing. The operation aims to provide humanitarian aid through three core strategies — Migration; Protection, Gender and Inclusion (PGI); and Community Engagement and Accountability — which are integrated across the different areas of focus:

- Shelter
- Livelihoods
- Health
- Water, Sanitation and Hygiene (WASH)

The National Societies included in this operation have implemented actions with IFRC’s support and through the generosity of other Movement and non-Movement partners. These actions have in some countries (such as Peru) created systems and structures that we can continue to support and build upon with the funds raised with this Emergency Appeal, ensuring the continuity of services to the migrant population and the implementation of cohesive strategies by the National Societies. The operation allows each National Society to tailor its intervention to the unique needs, capacities and limitations identified in each country.

Below a brief description of the current situation in the target countries: \(^6\)

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\(^3\) [https://robuenosaires.iom.int/sites/default/files/Documentos%20PDFs/Recent_extra_regional_intra_regional_and_extra_continental_migration_trends_in_south_america.pdf](https://robuenosaires.iom.int/sites/default/files/Documentos%20PDFs/Recent_extra_regional_intra_regional_and_extra_continental_migration_trends_in_south_america.pdf)


\(^6\) Information from the UN Regional Coordination Mechanism, news and government agencies.
**Argentina**
The Ministry of Foreign Relations states that there are currently **130,000 migrants and from Venezuela registered** in the country. It has become the highest nationality requesting regularization. Although the expected number of migrants has not changed, there is a clear difference in the entry points used. The previous figure of 80 per cent of migrants arriving via airports is now up to 50 per cent of migrants entering by land, mainly at the border in Jujuy and Foz Iguazu. According to observations and estimations of the National Society the profile of migrants seems to be changing, as many are reporting a different level of education than the previous immigrants that came into the country. A noticeable increase in nuclear families entering the country has augmented the need to provide services for accompanied minors along the migration route.

**Brazil**
As of 21 February, **94,844 Venezuelans requested asylum, and 64,707 received temporary visas**. Since April 2018, around 5,000 Venezuelans were transferred by the Brazilian government from the border areas to 17 other states in coordination with UN agencies and civil society⁷. This forms part of an internal reallocation program to states where more job opportunities for the migrant persons are available. The program was designed to reduce the pressure on host communities in the north of Brazil, where refugees and migrants have been arriving from Venezuela. In February, the daily average of entries in the Pacaraima border was 474 and the average number of exits was 105. In the same month, the number of indigenous people using informal crossings has increased.

**Ecuador**
It is estimated that around 1 million Venezuelan nationals entered Ecuador in 2018, reaching its most critical point on April 2018 when 4,000 persons per day entered the country. As of December, only 16% of the Venezuelan migrants that entered Ecuador (954,153) remained in the country, of which a significant number were moving towards Peru and Chile. Migrant populations have increased in urban areas such as Quito, Guayaquil, Manta, Ambato, Santo Domingo, Ibarra, among others. It is estimated that 16,000 migrant children are now part of the educational system. The migration route through Ecuador, extending from the northern border with Colombia to the southern border with Peru, continues (see map below for main entry points). There are two variants in this route: (i) those that enter and cross the country with no intention of staying; (ii) those who stay in cities along the route due to the extended travel time to reach the other border. The Ecuadorian government put in place new measurements (apostilled criminal record issued by Venezuelan authorities) which has decreased the daily average of registered migrants entering the country but it has also resulted in an increase in irregular border crossings.

7 https://reliefweb.int/report/brazil/over-5000-venezuelans-find-new-homes-through-brazil-s-internal-relocation-programme
Guyana

The Guyanese government will open an assistance centre for migrants to provide health services, including vaccinations and guidance to Venezuelan migrants. The support centre will be located in Charity, a small township located in the Pomeroon-Supenaam region, where Venezuelans cross by land into Guyana. An estimated 24,000 Venezuelans are living in the country, with a greater number of them engaged in pendular migration due to access to public health care and education in Guyana. However, some Venezuelan children face barriers because they do not speak English. In addition, the Guyanese government has granted Venezuelans tourist visas to stay for a period of three months. UNHCR and UNICEF have offered to provide humanitarian assistance to migrants, the majority of whom are indigenous people, in Guyana. A WASH assessment determined the need to provide services to at least 6,000 people during the next five months.

Panama

As of March 2018, more than 76,000 Venezuelans have sought to legally register to remain in Panama, which is an increase from 2015 when there were less than 10,000 Venezuelans in the country. These migrants are moving inland from big cities, such as Panama City, due to the high cost of living in the country’s urban areas. Panama remains one of the top destinations for Venezuelans. Although the Panamanian government has imposed restrictive measures for the entrance of nationals from this country, this has not stopped the influx of migrants but has decreased their access to basic services and entry into the formal labour market. There has been a noticeable shift from migrants traveling alone to migrants entering with their families, which raises the need to ensure protection for migrant children.

In addition, Panama also has an influx of other migrants, especially Cubans and also non-Spanish speaking migrants, who enter via informal and highly dangerous migratory routes on their journey to North America. The ongoing internal tension in Nicaragua could also lead to an increased number of migrants from that country to Panama. The limitation of controlled entry in the Costa Rican border of only 100 migrants per day also creates some pressure and limitations in the transit.

Peru

An estimated 700,000 Venezuelans are living in Peru, remaining the second most popular destination in South America for Venezuelans after Colombia. Of this group, 128,000 Venezuelans have a temporary resident permit and 221,000 are in the process of obtaining this permit. 35,000 alone have entered Peru in 2019. Although the government has given temporary legal status to Venezuelan migrants, they have limited access to basic services such as health, education and the formal labour market. According to the DTM-Peru (4th Round) results, at least 56 per cent of the Venezuelan population surveyed were between 18 and 29 years old, compared to 5 per cent for people over the age of 60. According to the same survey, 46 per cent suffered discrimination before reaching Tumbes and 73 per cent have chronic diseases that require medication.

Trinidad and Tobago

Trinidad and Tobago, located 11 kilometres (7 miles) off the coast of Venezuela, has a population of 1,200,000 and approximately 40,000 Venezuelan migrants in country, making it the country in the Americas with the largest proportion of migrants from Venezuela. This population faces challenges to obtain international protection and security, health and other basic services, which is compounded by the lack of legal documentation, vulnerability to sexual and gender-based
violence, exploitation and abuse, and lack of access to basic rights (UNHCR, 2017). Without refugee status determination (RSD) and similar mechanisms, asylum seekers and refugees do not have the legal right to work, receive a public-school education or drive vehicles. Venezuelan asylum seekers experience stigma and discrimination, with acts of resentment regarding employment and access to health services further threatening their security. As in other countries the proportion of male migrants is larger in the migrant population surveyed (64% men and 36% women). Income generation or employment and legal assistance have been identified as the main needs.

**Uruguay**

Recent official figures indicate that there are at least 10,000 Venezuelans in Uruguay. Although the Southern Common Market (MERCOSUR for its acronym in Spanish) suspended Venezuela, the Uruguayan government has provided Venezuelan migrants with access to the formal labour market and basic services; however, due to the increasing number of migrants, support from other actors to attend their specific needs is required. There is also a high number of Cuban migrants which do not have the migratory rights in Uruguay which makes them more exposed to situations of vulnerability. The main challenges for the migrant persons are access to shelter, health and other basic services, as well as their situation of economic vulnerability.

**Summary of current response**

The operation aims to provide a common and coherent regional framework to the response intervention. However, each National Society provides a response tailored to the needs and situation of migrants in their countries, their capacities and expertise.

**Summary of current response per National Society**

Prior to the January 2019 transfer of funds to the National Societies, each Red Cross Society implemented their humanitarian response with their own funds, including those of the generous donors that have supported migration projects in the region. While these National Societies have provided humanitarian services, more funds are required to implement the planned action of this regional appeal, particularly to respond to the growing humanitarian needs of the population in the highest level of vulnerability.

The **Argentine Red Cross** has launched an inter-sectorial “Migration Cell” to:

- Coordinate all actions related to the work with migrants
- Validate the assessments carried out by the ARC
- Consolidate budgets and contribute to the National Plan in response of population movement
- Support, develop and validate the local Action Plans in areas of high migration flow.

The ARC conducted a baseline study, highlighting the branches that need the most support, as they will provide assistance in the migration flow. The Restoring Family Links channels are open, and the National Society is coordinating with a bank to implement the Cash-Based Intervention (CBI) for shelter. The ARC requires further funds to implement its planned actions to respond to migrants’ humanitarian needs.

The International Committee of the Red Cross offers RFL services (free phone calls, internet service, charging of communication devices’ batteries, and family searches) in four strategic posts along the Brazil-Venezuela border and capital city of Roraima State. In addition, the ICRC provides a similar RFL response during the Brazilian government’s resettlement initiative (“interiorização”), which previously (until December 2018) had been carried out by the **Brazilian Red Cross** (with ICRC technical/financial support). Although absent in Roraima, the National Society continues to offer RFL services in other Brazilian states; in São Paulo specifically, the branch provides these services in migrant shelters, at the branch HQ and in other migrant events that take place in the city.

Up to 27 March, the ICRC has offered 97,345 phone calls, 13,704 accesses to WiFi, and 8,952 battery charging services at its RFL posts.

The ICRC has also carried out three Water and Habitat assessment interventions in the border city of Pacaraima (state hospital, the Catholic Church’s Community Centre and an Education Centre for Migrants). In addition to this, Protection and Water and Habitat assessments have been carried out with migrants and host communities and important needs were identified (ex. limited access to education, clean water, and hygiene infrastructures).
The Ecuadorian Red Cross reached 148,993 people with RFL; psychosocial support; first aid; water, sanitation and hygiene (including safe water access) in Carchi, El Oro, Sucumbios, Guayas, Santo Domingo de los Tsachilas and Pichincha. A dashboard reports the assistance provided and is updated daily. This was done with the support for several partners (including the ICRC and the DREF operation),

The Ecuadorian Red Cross works with the ICRC on Water and Habitat projects in the two main border crossing points. The ongoing rehabilitation of the Transit Centre in Tulcán will provide a new permanent infrastructure to support child protection, protection for women and for other migrants in situations of vulnerability. The ICRC is also improving access to safe water for Venezuelan migrants in different transit and permanent places in Ecuador.

The ERC, with ICRC and IFRC support, provides RFL services at kiosks in the border of Colombia and Peru, as well as in Guayaquil and Santo Domingo de los Tsachilas. More than 89,756 RFL services have been provided up to 22 March.

As part of the mentioned DREF operation, the Ecuadorian Red Cross provided services to migrants in the border points and cities in the interior of the country. The National Society is part of the national working group on population mobility, supported the Ministry of Foreign Affairs.

The National Society has 5 water points which provide between 3,000 and 9,000 litres of safe water for consumption weekly. It has established 11 safe spaces for children and provided more than 23,052 PSP services. Also, the ERC carries out community engagement and accountability actions in their intervention and involves host communities through different activities to reduce xenophobia and discrimination against migrants. For example, a theatre comedy play is performed in Quito and other locations and radio messages are transmitted for host communities to tackle xenophobia. The Ecuadorian RC is also looking to implement actions to facilitate the re-entry of children to educational centres.

The Guyana Red Cross Society works with UNICEF, UNHCR and the Guyana Civil Defence Commission to assist in the registration of asylum seekers in the country and provide humanitarian assistance. The National Society, in accordance with its role as an auxiliary of the State in humanitarian issues, is coordinating State agencies to increase its actions, pending the arrival of funds from this Emergency Appeal.

Since October 2018 through January 2019, the Red Cross Society of Panama (RCSP) has worked with IOM in the provision of humanitarian assistance. The RCSP reached in that period 1,028 Venezuelan migrants. The assistance focused on food vouchers, shelter, health assistance, provision of baby kits and hygiene kits, and transport. The PRCS seeks to continue the actions done with IOM through this Appeal and expand the aid to migrants from other nationalities which are in transit heading north and are in high conditions of vulnerability.

The Peruvian Red Cross reached 12,897 persons through health services from May 2018 through March 2019, with the support of the IFRC and other actors. The PRC also distributed 11,900,000 litres of water in showers and hygiene services; and with support from the ICRC, the PRC has provided more than 18,248 RFL services (calls, internet services and battery charging) between November and February. Through the support of UNHCR, in Peru (Tumbes) migrants accessed information through leaflets and information totems and signage. In March 2019, with the support of the IM surge staff from the operation, a dashboard has been set up to report all the actions carried out by the PRC with support from UNHCR, ICRC and IFRC. The PRC trained an additional group of government workers and humanitarian workers from the Binational Border Attention Centre (CEBAF for its acronym in Spanish) in Tumbes in first aid. Previously, 125 volunteers had been trained mostly in 2018 in Communications, PSP, Migration and RCRC Movement induction through the previous project supported by UNHCR.

With Appeal funds specifically, as of 23 March 2019, the PRC provided health services to 420 people in Lima and to 3,452 people in the CEBAF in Tumbes.

The Trinidad and Tobago Red Cross Society and the ICRC continue to strengthen dialogue and coordination with State authorities to monitor the situation of people in the detention centre for migrants.

The Uruguayan Red Cross allocated an economic fund to provide food security services (meals) to migrant persons of any nationality that comply with a set of vulnerability criteria. These services are provided Monday through Friday, in coordination with the Uruguay Scouts Movement, which has provided the installations and cooking utensils for this activity, as well as volunteers. There currently are 24 persons receiving food, with an average of 15 persons per day, including 4 children under the age of 12. When more funds are received, the food assistance will be provided on weekends. The persons receiving food assistance were referred to the National Society through the Ministry of Social Development (MIDES), and the non-governmental organizations Manos Veneguyas and Idas y Vueltas. The branch involved in this service received training on the use of open data kit (ODK) and Mega V to enable better registry and distribution of assistance to the persons reached.
The URC health team identifies cases that require special treatment, as well as collaboration in assessment and administration of different services such as health centres access, medicines and treatment for chronic and immune deficiencies. Evaluation is currently under way in four border departments to be able to support branches in their work with the communities and in coordination with MIDES. There is advocacy work to identify and access a structure that will allow to manage a shelter for migrant persons.

**Overview of Red Cross Red Crescent Movement in the region**

The IFRC’s Americas Regional Office (ARO) ensures proper and effective coordination between Movement components (National Societies and the ICRC) to meet the needs of the affected countries through their respective National Society. It has formed a Migration Coordination Cell (MCC) composed of experts from the IFRC to assess the situation and support the implementation of active emergency operations in the region. See more details about the MCC in previous reports. ARO is committed to coordinating all partnerships meetings, as per the National Societies’ mandate and it organizes regular online conferences to ensure exchange of information within the Movement.

The IFRC also coordinates closely with the ICRC delegations and regional delegations in the Americas and at its headquarters in Geneva, which collectively cover migrants’ entire migratory journey. The ICRC, due to its well-established expertise and long-standing experience in Protection, is increasing its support to the affected National Societies along the migratory routes.

Another area of collaboration is coordinated humanitarian action and external communication, including community engagement and accountability (CEA) approaches to develop joint communication guidelines, capacities and a CEA product. As one of the joint action points agreed during the Revision Workshop in March, the ICRC and IFRC will work on establishing a data protection framework to provide guidance to the National Societies.

The International Committee of the Red Cross provides a response to the needs of migrants in the countries covered by this appeal through its Regional Delegation in Brasilia (covering Brazil, Argentina, Uruguay and Chile), its Regional Delegation in Lima (covering Peru, Ecuador and Bolivia), its Regional Delegation in Caracas (covering Venezuela, Trinidad and Tobago, Aruba, Bonaire and Curaçao) and its Regional Delegation for Panama and the Caribbean. The ICRC responds to the needs of migrants in Colombia through its country delegation. The ICRC actions, with a strong focus in protection and RFL, are primarily implemented in sensitive border areas (mainly in Brazil, Colombia and Venezuela but also in Peru, Ecuador and the Caribbean islands). These are coordinated and complementary to those undertaken by other Movement partners.

The ICRC, together with host national societies, the Secretariat and other partner national societies continues to support the provision of RFL services along the migratory route. The 33 RFL connectivity kiosks (23 supported/implemented by ICRC) offer a combination of the following services: phone calls, access to WiFi (with own smartphone or Red Cross smartphones), access to the internet (with Red Cross laptops/tablets) and battery charging. As of January 2019, these RFL kiosks facilitated access to WiFi 21,915 times, charged 20,501 batteries and enabled 125,792 phone calls.

In some of these kiosks, the Red Cross distributes self-care messages and messages to prevent family separation along with first aid, hydration and psychosocial support services. The ICRC also invests in the capacities of National RC/RC societies in RFL. In Ecuador, 24 volunteers from ERC branches participated in the RFL basic workshop and 13 volunteers of the ERC in the Family Link Answers workshop (trained to use the tool and systematize their RFL activities).

As migration becomes an increasingly polarising issue, all Movement components maintain an approach based on the strict application of the Fundamental Principles, which preserves our independence, neutrality and impartiality. These established minimum elements are included in the operational agreements between the Movement's components and its external partners.

The Spanish Red Cross is present in Colombia, Ecuador and Peru implementing 10 bilateral migration-related projects, thus far reaching 135,925 people. The projects in Ecuador focus on food security, PSP, health services (mobile clinics in Santo Domingo and San Miguel), hygiene promotion and protection. In Peru, it implements actions in hygiene promotion and protection in Piura, Chiclayo and Trujillo - as well as food security, health services (mobile and fix clinics), hygiene promotion and protection in Lima (in San Juan de Lurigancho and the northern area of Lima).

The German Red Cross is also supporting actions in Colombia and Ecuador and along the migratory route. It has established mobile clinics along the Ecuadorian and Colombian border to provide emergency health services, food items, hygiene kits and information.

**Overview of non-RCRC actors in country**

The RCRC Movement coordinates with the IOM, UNHCR, and other donors and NGOs in the Regional Platform of Interagency Coordination, to organise and synchronise the response to migrant persons and refugees from
Venezuela at the regional level. At present, the platform has 43 participants. The Regional Platform provides regular updates on assessments and activities conducted by partners in each country. The platform focuses on four areas of intervention: 1) Direct emergency assistance; 2) Protection; 3) Socio-economic and cultural integration; and 4) Strengthening capacities of the host government.

National Societies participate in national coordination platforms managed by United Nations in their role as auxiliaries of their governments in humanitarian matters and abiding with Red Cross principles. For example:

- **In Argentina**, the Nation has conducted analysis and a census of Venezuelan migrants. HABITAT is also participating in actions. Adventist Development and Relief Agency International (ADRA) is working on shelter and advocacy jointly with UNHCR and the State. IOM is leading the contextual and statistical analysis process for all organizations with the State.

- **The Ecuadorian Red Cross** is part of the Anti-trafficking Network. The ERC also is part of the National Decentralized Risk Management System with solid participation in the Health, Shelter and Humanitarian Assistance working groups, and provides support to the Risk Management and Emergencies working groups. Among the other organizations working in Ecuador are Norwegian Refugee Council, HIAS, Alas de Colibri, World Vision, ADR, Cáritas, National Council for Children and Adolescents, Hogar de Cristo, Jesuit Service for Refugees, Tarabita Foundation, UN agencies (UNHCR, IOM, WFP, UNICEF, PAHO) as well as many governmental bodies.

- **In Guyana**, the Civil Defence Commission (NDO) - with support from the United Nations Children’s Fund (UNICEF) prepositioned and distributed relief supplies. UNICEF donated shelter and WASH relief items. IOM is currently conducting work in gathering data on the migrants and observed trends through a DMT. Roman Catholic Diocese of Guyana – more than 700 Venezuelan nationals have so far accessed the services of the Venezuelan Support Group (VSG) since it was set up for immigrants seeking refuge here, seeing between 50 and 60 Venezuelan immigrants every week. Located in the compound of the Catholic Life Centre on Brickdam, the VSG was founded by a group of civil society and faith-based organisations including: the Amdenian Peoples Association, the Guyana Human Rights Association (GHRA), Transparency Institute Guyana Inc, Moray House Trust, Policy Reform Guyana, Red Thread, the Roman Catholic Diocese of Guyana and the Ursuline Sisters in Guyana.

- **The Red Cross Society of Panama** maintains constant communication with State agencies involved in migration matters, including the National Office for the Attention of Refugees, and other organisations: Catholic Church Shelter for Refugees, RET International and the Norwegian Refugee Council, among others.

- **The Peruvian Red Cross** works with State agencies, including the Ministry of Health, NGOs and humanitarian actors in the CEBAF in Tumbes. The 4th round of the DTM and its 3W tool (January 2019) gathered that there are 30 organisations working with Venezuelan migrants in 11 regions, many of them faith-based organisations. Tumbes and Lima having the highest presence of organisations, and followed by the cities of Piura, Lambayeque, Chiclayo, Trujillo, Tacna and Tambopat. The IFRC and PRC have conducted meetings with UNHCR and the Migrants and Refugee Working Group and subgroups. Coordination also takes place with RET International for psychological support to migrants.

- **In Trinidad and Tobago**, the Living Water Community (LWC) is the UNHCR implementing partner. The LWC provides psychosocial support and humanitarian assistance to asylum-seekers and refugees and facilitates the registration of asylum-seekers with UNHCR. In the last two years, LWC has seen over six 6,000 asylum seekers. UNHCR is also advocating for the rights of asylum seekers and refugees within national policy and legislation, which is currently being drafted.

- **The Uruguayan Red Cross** works closely with the Social Development Ministry with a framework for response action, in addition to information sharing and interinstitutional coordination in the border departments.

### Needs analysis and scenario planning

Since the start of the operation, the IFRC and National Societies have continued conducting assessments of migrants’ needs and the situation in host countries. Additional information is gathered through the Regional Platform and secondary sources (governments and humanitarian actors in the field) to identify changes per country and regionally in migration flows, profiles, needs and actors working on these. Overall, needs focus on shelter, health, WASH, livelihoods, legal counselling, protection, access to information, maintaining and restoring family links and education. These vary depending on the migrant’s profile (gender, age, where they are in their journey [in transit or at their final destination]) and the country.
The IFRC sees the need to increase and highlight more actions related to Protection, Gender and Inclusion (PGI), and Community Engagement and Accountability (CEA) within the context of Migration for all sectors. The upcoming revised appeal will bring together the revisions National Societies are making to their national plans of actions and budgets. See section **B. Operational Strategy**.

**Operation Risk Assessment**

While clear predictions regarding the evolution of this context are not possible, several factors will continue to influence the current population movement:

- The socio-political situation in Venezuela, which also encompasses the context of pressure from external actors;
- Changes to migrant profiles, new routes and shifts in crossing points along borders;
- The economic situation in Venezuela that has generated a shortage of food, water supply and limited access to healthcare, which especially affect children and people with chronic diseases, and has a regional impact;
- The illicit armed groups active on the Colombian-Venezuelan border that could continue to spur the displacement and the mobility of the population; and
- Changes in migration policies, including the closure of borders, in host and transit countries.

The IFRC, during an internal review, mapped different macro scenarios to identify possible regional-level actions for different types of outcomes of the current situation, analysing what could be the impact at the regional level. This exercise was repeated with the National Societies from Argentina, Costa Rica, Ecuador, Panama, Peru and Uruguay to assess how each scenario could affect the situation in their countries and lead to possible changes in their humanitarian interventions.

The evolution of the influx as stated in the previous update remains:

- It can be assumed that the flow of people will continue;
- The actual number of migrants is underestimated due to the use of unofficial border crossings; and
- Migration routes could shift if more restrictive migration policies are implemented.

**B. OPERATIONAL STRATEGY**

**Proposed strategy**

In response to a sustained increase in population movements in the Americas, the RCRC Movement is conducting humanitarian operations in eight countries receiving migrants. The National Societies in these countries have scaled up their response with the support of other components of the Movement: the ICRC, PNS and the IFRC’s Secretariat through DREF operations, the Emergency Appeal Colombia: Population Movement (MDRCO014) and this Regional Emergency Appeal.

**Regional strategy on Migration:**

This EA is aligned with the **Toluca Declaration for Migration (TDM)**, which was adopted in November 2016 by the International Red Cross and Red Crescent Movement and established the Movement’s regional priorities for the response to the humanitarian needs of migrants in the Americas. A **Red Cross Movement Plan of Action on Migration in the Americas 2017 to 2020** was established the following year, defining four lines of intervention to address migration:

- Improve the protection of migrants and reduce their vulnerabilities;
- Reduce stigma and discrimination against migrants and promote social inclusion;
- Conduct humanitarian diplomacy to protect migrants’ dignity and rights;
- Strengthen knowledge management in the Movement through collaborative platforms and networks.

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*The Costa Rican Red Cross was invited to the process as they are also responding to the needs of migrants and have assessed an scenario of increase influx in their country.*
All four lines are being addressed through this EA, with Protection, Gender and Inclusion (PGI) playing a central role in the intervention, supported by Community Engagement and Accountability (CEA) strategies that will include campaigns aimed at reducing stigma and discrimination among host communities and promoting migrants’ social inclusion.

Likewise, ARO is currently developing an Information Management (IM) system that will allow for systematic mobile data collection and real-time collaborative reporting across all the countries participating in this Regional EA. This platform will also aggregate data from other countries in the region implementing Population Movement operations, such as Colombia and the countries included in the Monarch Butterfly Programme described below.

While humanitarian diplomacy is not at the core of this response, IFRC and the NSs involved will participate in coordination platforms with key external partners and will produce public newsletters and press releases aimed at influencing decisions at local, national and international levels.

**Three core intervention themes:**

Migration, Protection and CEA approaches are the core of this operation, assuring that migrants’ rights are considered when implementing activities.

1. **Migration:**

Migration is at the core of this Emergency Appeal. There is a clear need for the Movement to increase its support to National Societies that are interested in working with and for migrants. The intention is to ensure that migration as a sector is going to be represented programmatically and strategically to assure sustainability for all activities managed by National Societies. In line with the IFRC Migration Policy (2009), the term “migration” can be understood as covering all forms of movement.

2. **Protection, Gender and Inclusion (PGI):**

Protection encompasses “all activities aimed at ensuring full respect for the rights of the individual in accordance with the letter and the spirit of the relevant bodies of law, i.e. human rights law, international humanitarian law, and refugee law.” National Societies are engaged in a range of activities to promote the protection of migrants. This includes work in immigration detention, restoring family links, working with survivors of trafficking and slavery, social inclusion, provision of legal support, and information and advocacy activities (IFRC Strategy on Migration).

3. **Community Engagement and Accountability (CEA):**

Community Engagement and Accountability (CEA) will be at the core of the response. National Societies will develop national CEA strategies that ensure communities are consulted, included and listened to throughout the intervention cycle. CEA is understood as a transversal theme in the intervention, however, in an effort to show a coherent CEA strategy that is present in every area of intervention, the CEA outcome, outputs and indicators are grouped together under the Migration area of focus in section C. Detailed Operational Plan, below. All four pillars of CEA will be implemented in this Emergency Appeal:

- **Community participation and feedback:** Honest, timely and accessible information will be shared with communities about who the National Societies are and what they are doing. Additionally, communities will be engaged to guide programme design and delivery, and will have access to systems to provide feedback, questions and complaints.
- **Providing information as aid:** Migrants will be provided with timely, actionable and potentially life-saving information, including:
  - Information on the migratory route and potential risks faced by migrants (including climate, terrain and other potentially life-saving information)
  - Information on migrants’ rights at the country of transit or destination
  - Information on services available to migrants through other bodies or organizations
  - Reproductive health information
  - Hygiene promotion information
  - Information on Sex and Gender-Based Violence (SGBV)
  - Messages against xenophobia and discrimination
- **Behaviour and social change communication:** Additionally, perception activities will take place with host communities to assess current perceptions towards the migrant community, and communication activities to prevent or mitigate discrimination and xenophobia will be planned accordingly.

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9 IFRC Global Strategy on Migration 2018-2022 “By the end of 2022, 75% of National Societies undertake needs assessments and integrate migration into their strategic planning”. 
Through a participatory approach, the Movement is developing a continuous assessment of the context that is guided by the recognition that factors such as sex, age, disability, gender, sexuality, health status, legal and social status and ethnicity or country of origin may put migrants at heightened risk of discrimination, abuse and exploitation along migratory routes. This also includes the development of assessment forms for this specific situation and that were connected to the assessment done by the FACT team from June to August 2018.

The issue of humanitarian data protection is critical. The aim is to provide services for vulnerable migrant populations that help them to connect with their loved ones while limiting their exposure and risks in relation to traceability. The IFRC and ICRC will work on a joint approach to guide National Societies on the issue of data protection.

As a humanitarian actor, the Movement is documenting and analysing possible challenges to better understand and respond to the risks and threats faced by people on the move and to assess the capacity and commitment of authorities to protect this population. This entails issues of “future” risk, such as the consequences of new migration policies in each country, an increase in xenophobia and/or a general deterioration of the situation.

Operation’s objective: Urgent and immediate assistance and protection is provided in a coordinated manner to people traveling along migratory routes, at migration points and at their destination.

<table>
<thead>
<tr>
<th>Table 1 Areas of intervention per National Society as per the current EPoA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shelter</td>
</tr>
<tr>
<td>Argentina</td>
</tr>
<tr>
<td>Brazil</td>
</tr>
<tr>
<td>Ecuador</td>
</tr>
<tr>
<td>Guyana</td>
</tr>
<tr>
<td>Peru</td>
</tr>
<tr>
<td>Panama</td>
</tr>
<tr>
<td>Trinidad &amp; Tobago</td>
</tr>
<tr>
<td>Uruguay</td>
</tr>
</tbody>
</table>

C. DETAILED OPERATIONAL PLAN

This report covers the period from September 2018 through mid-March 2019. As contributions to the EA have been slow to build (currently at 26% coverage), National Societies received the first disbursement of funds in December 2018 and January 2019. The National Societies also use local funds and partnerships and emergency funds to implement activities. The following section focuses on the actions covered with this Emergency Appeal’s funds.

The IFRC is revising this Operational Plan to reflect the EPoA for each National Society reviewed in March. This operations update reflects revisions made by technical teams at the level of indicators and outputs in view of the revised common framework for the operation.

The Revised Appeal will include a revision in the timeframe, budget, targets per indicators and activities detailed by each National Society in the revised national EPoA. The launch of the Revised Appeal is planned for late April.
Shelter
People targeted: 14,290
People reached: 0

Outcome 1: The migrant population restore and strengthen their safety, well-being and short, medium and longer-term recovery through shelter and settlement solutions.

Indicators: | Target | Actual |
---|---|---|
Number of shelter services provided that are adapted to migrants’ needs (disaggregated by type of service) | 4,730 | 0 |

Output 1.1: Migrants have received assistance to cover their basic short-term shelter needs.

Number of NFIs and emergency shelter materials/kits delivered | 4,330<sup>10</sup> | 0 |

Output 1.2: Migrants have received assistance to cover their mid-term shelter needs.

Number of assisted households able to meet their mid-term shelter needs through cash for rent programmes | 400 households<sup>11</sup> | 0 |

Output 1.3: Migrants have received assistance to cover their long-term shelter needs

One regional strategy for long-term and programmatic approach is produced | 1 | 0 |

Progress towards outcomes

Outputs 1.1 and 1.2:
The Argentine RC: One meeting with national actors carried out to coordinate shelter-related activities. The ARC conducted an assessment on the shelter needs of migrants during January and February 2019, and it will implement a cash-based intervention to cover rent costs supporting at least 250 households.

The Uruguayan RC is progressing with the procurement for the 300 NFI to distribute and it trained 30 volunteers on distribution of humanitarian aid. In addition, a feasibility study is in progress for cash-based intervention (CBI) for rent.

Livelihoods and basic needs
Households targeted: 4,500
People reached: 0

Outcome 2: The target population, especially in disaster and crisis affected areas, restores and strengthens its livelihoods

Indicators: | Target | Actual |
---|---|---|
Number of targeted households (disaggregated by age and gender) that have enough cash or income to meet their survival threshold | 4,500 | 0 |

Output 2.1: Households are provided with unconditional/multi-purpose, or conditional cash grants to address their basic needs

Number of country level livelihoods needs assessments for migrants | 4 | 0 |

Number of assisted households able to meet (Survival) Minimum Expenditure Basket needs (including food items, food-related and non-food items) | 4,500<sup>12</sup> | 795 dinners* |

Output 2.2: Vocational skills training and/or productive assets to improve income sources are provided to target population.

Number of labour market surveys carried out | 2 | 0 |

---
<sup>10</sup> Ecuador 3,530 NFI; Guyana 500 NFI; Uruguay 300 NFI.
<sup>11</sup> Argentina 250 disbursements, Panama 150 cards.
<sup>12</sup> 2,000 households in Brazil, 750 in Ecuador, 200 in Guyana, 150 vouchers in Panama, 1,400 in Trinidad & Tobago.
### Progress towards outcomes

#### Output 2.1:
Conversations with the IFRC’s Livelihoods Centre, sponsored by the Spanish Red Cross, are underway to identify technical and material support, including for National Societies, in livelihoods.

During the regional revision workshop, the Livelihoods Centre focal point and the Cash Transfer focal point in ARO provided guidance to National Societies on livelihoods, specifically on household economic security methodology and on how to calculate gaps (food security/survival gap and protection of livelihoods gap), which helps determine the amount for unconditional grants for families to meet their minimum survival or livelihoods protection thresholds. All National Societies that will implement activities in livelihoods will carry out a feasibility study for CBI and market assessments.

The Ecuadorian RC will conduct a baseline and feasibility study for a livelihoods or cash-based intervention for mid-term solutions.

The Uruguayan RC is providing meals to migrants, up to mid-March it had delivered 795 dinner services. The same feasibility study underway for the shelter sector will look at other livelihoods needs and how can the CBI support broader aspects in addition to rent.

The Panamanian RC has already carried out an assessment previously through the OIM project that supported actions until December 2019. This assessment will be the base for the planned livelihoods intervention.

#### Output 2.2:
Argentina and Ecuador plan to carry out labour market surveys to better assess the needs.

### Health

<table>
<thead>
<tr>
<th>People targeted</th>
<th>People reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>83,200</td>
<td>3,872</td>
</tr>
</tbody>
</table>

#### Prioritized countries:
- Argentina
- Brazil
- Ecuador
- Panama
- Peru
- Trinidad & Tobago
- Uruguay

#### Outcome 3: The immediate risks to the health of affected populations are reduced.

#### Indicators:

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of people reached with health services adapted to migrants’ needs (disaggregated by age and gender)</td>
<td>83,200</td>
<td>3,872</td>
</tr>
</tbody>
</table>

#### Output 3.1:
The target population is provided with rapid medical management of injuries and diseases.

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number # of basic health services adapted to migrants’ needs delivered (disaggregated by type of service)</td>
<td>TBD</td>
<td>1</td>
</tr>
</tbody>
</table>

#### Output 3.2:
Psychosocial support provided to the target population

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of people reached through psychosocial support actions</td>
<td>TBD</td>
<td>23</td>
</tr>
</tbody>
</table>

#### Progress towards outcomes

13 2,000 in Brazil, 188 in Guyana.
Output 3.1:
Argentina: The ARC during the first quarter of 2019 has already coordinated with health centres and local health institutions for the future actions planned and it has started to print material with health information to distribute to migrants. It has also completed the first training for its consulting staff so they have knowledge of how migrants can access the national health services.

Peru: The construction of three consultation rooms in the clinic at the Lima branch has been completed. These consultation rooms will be available to people in a situation of vulnerability who are outside of the coverage provided by the State, after the approval of the Ministry of Health. The PRC is also conducting community health sessions that integrate a variety of health services: general physician, paediatrics, psychology, health information on disease prevention and access to health services, and friendly spaces for children.

3,872 people have been assisted in between December 2018 and March 2019 in the centres in Tumbes and Lima. The month of December was covered through funds outside of this operation.

The information sessions and materials in Peru have been adapted with an inclusion approach to provide differentiated information to boys and girls. The talks include distribution of information materials and sunscreen.

In the centre in Tumbes, the PRC assessed the epidemiological risk due to the rainy season and flooding alert jointly with the Ministry of Health. As a result, the centre will increase prevention actions against dengue, zika and chikungunya, including distribution of prevention material and mosquito repellents. Also, the centre supported with vaccinations in line with standards established by the Ministry of Health and with support of PAHO.

Output 3.2: In December 2018, the Regional Workshop for Health Attention and Psychosocial Support Guide for Migrant Persons was held in Panama City.

The workshop had the objective to provide the participants with the tools (guide), practices, methodology and necessary teaching materials, to implement suitable health services to populations on the move, reducing their vulnerabilities and promoting their resilience. This training also aimed to train the participants to replicate this workshop in their National Societies.

Nineteen people (14 women and 5 men) participated from 15 different countries: Mexico, Guatemala, Honduras, El Salvador, Nicaragua, Costa Rica, Panama, Colombia, Venezuela, Ecuador, Peru, Brazil, Chile, Uruguay and Argentina.

In Argentina, the ARC has conducted the first community psychosocial support meeting/session, and is planning to conduct several more to provide information material.

In Peru, the IFRC created the educational plan in psychosocial support (basic, intermediate and advanced levels), with a total of 7 modules and 101 class hours and presented this to the Peruvian Red Cross in January. The psychological first aid course with an emphasis on human mobility was given to all regional intervention team and internal staff for the improvement of their skills in psychosocial support and attention. At least 23 people (15 adults and 8 children) received psychotherapy sessions.
### Protection, Gender and Inclusion

**People targeted:** 40,000  
**People reached:** 0

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of assessments of migrants needs that incorporate PGI to identify potential people to be reached and define different approaches to the intervention</td>
<td>At least 3</td>
<td>1</td>
</tr>
</tbody>
</table>

**Outcome 5.1:** National Society interventions improve equitable access to basic services, considering different needs based on gender and other diversity factors.

**Outcome 5.2:** Programmes and operations prevent and respond to sexual-and-gender-based violence and other forms of violence especially against children.

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of child-friendly spaces operated at assistance points or mobile assistance units that integrate child protection standards</td>
<td>TBD</td>
<td>15</td>
</tr>
<tr>
<td>Number of activities implemented to help prevent SGBV</td>
<td>TBD</td>
<td>1</td>
</tr>
</tbody>
</table>

### Water, sanitation and hygiene

**People targeted:** 52,150  
**People reached:** 2,083

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of people that have access to safe water and minimum conditions for basic sanitation and hygiene</td>
<td>52,150</td>
<td>2,083</td>
</tr>
</tbody>
</table>

**Output 4.1:** The National Societies provide migrants in border areas with increased access to safe water, sanitation and promote positive behavioural changes for improved hygiene practices in target population.

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of hydration points, showers and bathrooms established</td>
<td>TBD</td>
<td>0</td>
</tr>
<tr>
<td>Number of litres of water distributed</td>
<td>TBD</td>
<td>72,780</td>
</tr>
<tr>
<td>Number of personal hygiene kits provided according to age and gender.</td>
<td>16,460&lt;sup&gt;14&lt;/sup&gt;</td>
<td>2,083</td>
</tr>
</tbody>
</table>

**Progress towards outcomes**

**In Peru:**

- 2,000 rucksacks distributed with 2,000 bottles of bug repellent to prevent dengue or malaria, and 156 bottles of shampoo.
- 72,780 litres of water distributed for human consumption in March.

In 2019, it has not been necessary to provide additional water to showers and bathrooms as it is the rainy season. During the same month, a WASH assessment was conducted to identify the alternative for water provision in the CEBAF. The report is under development.

**In Uruguay:**

- 67 hygiene kits distributed in Santa Rosa and 16 hygiene kits more in Montevideo as of 29 March.

The State donated 200 hygiene kits to the URC and this appeal will cover 400 additional kits and the distribution costs of all 600.

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<sup>14</sup> Ecuador 7,500 hygiene kits, Panama 250 hygiene kits (family and baby), Peru 7,310 personal hygiene kits, Trinidad and Tobago 800 hygiene kits, and Uruguay 600 hygiene kits.
Progress towards outcomes

Output 5.1:
The Argentine RC conducted in the first quarter of 2019 a needs assessment of the specific needs of the affected migrant population based on the criteria selected from the Minimum Standards on Gender and Diversity and the IFRC Migration Policy. At the same time, jointly with the IFRC the ARC operational team carried out the first basic training session to staff and volunteers on the application of the Minimum Standards. This process enabled sectorial teams to make the initial adjustments necessary in the other sectorial interventions to integrate measures to address specific vulnerabilities related to gender and diversity (including disability).

Additional assessments to identify specific and differentiated needs are planned in Ecuador and Peru.

Output 5.2:
The Ecuadorian RC has 11 child-friendly spaces open. The operation will seek to support or complement the continuation of these services.

The Uruguayan RC is designing visual sensitization materials on protection, gender and inclusion.

The IFRC and Peruvian RC also include child-friendly spaces during their community health days (3 health days organized and a 4th one was done at the end of March). In the CEBAF, videos are constantly played since January that include messages on self-care measurements for people on the move.

Output 6:
The migrant population receives comprehensive assistance and protection according to the stage of their migratory journey through the National Societies' branch network

<table>
<thead>
<tr>
<th>Migration</th>
<th>Prioritized countries:</th>
</tr>
</thead>
<tbody>
<tr>
<td>People targeted: 81,800</td>
<td>Argentina</td>
</tr>
<tr>
<td>People reached: 0</td>
<td>Brazil</td>
</tr>
<tr>
<td></td>
<td>Ecuador</td>
</tr>
<tr>
<td></td>
<td>Panama</td>
</tr>
<tr>
<td></td>
<td>Peru</td>
</tr>
<tr>
<td></td>
<td>Trinidad &amp; Tobago</td>
</tr>
<tr>
<td></td>
<td>Uruguay</td>
</tr>
</tbody>
</table>

Outcome 6: The migrant population receives comprehensive assistance and protection according to the stage of their migratory journey through the National Societies’ branch network

<table>
<thead>
<tr>
<th>Indicators:</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of services for migrants offered at integrated assistance points or mobile assistance units (by type of service)</td>
<td>TBD</td>
<td>0</td>
</tr>
</tbody>
</table>

Output 6.1: Assistance and protection services are provided and promoted to migrants and their families through collaboration with local and national authorities, as well as in collaboration with other relevant organizations.

<table>
<thead>
<tr>
<th>Indicators:</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of national referral systems established</td>
<td>7</td>
<td>0</td>
</tr>
<tr>
<td>Number of cases referred to other stakeholders</td>
<td>TBD</td>
<td>0</td>
</tr>
</tbody>
</table>

Output 6.2: Comprehensive care points in receiving areas and host communities are established through the branch network.

<table>
<thead>
<tr>
<th>Indicators:</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of assistance points and mobile assistance units for the migrant population staffed by volunteers during the action</td>
<td>TBD</td>
<td>1</td>
</tr>
</tbody>
</table>
### Outcome 6.3: The target population receives services for the digitalization and protection of their documents and information

<table>
<thead>
<tr>
<th>Number of services delivered to re-establish and maintain contact with family members</th>
<th>TBD</th>
<th>To be reported in the following update</th>
</tr>
</thead>
</table>

### Progress towards outcomes

Output 6.1:

The ARC identified affected migrants for assistance based on its initial assessment. It also developed accessible information for counselling work with key messages on prevention and reduction of risks associated with unsafe migration and situations of exploitation.

The ERC already has a protocol to refer cases to national institutions regarding possible cases of SGBV and other protection risks.

The URC started an assessment process, the information from two additional branches is being gathered.

Advocacy is taking place with other National Societies to ensure the proper channels and procedures are clear when protection cases are identified and how to refer them to the proper national authorities or organizations that have dedicated expertise.

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### Output 7.1: The target population has access to key information on risks along the migratory route, is informed about services available to them, and receives self-care and protection messages.

<table>
<thead>
<tr>
<th>Indicators:</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of national CEA strategies developed</td>
<td>8</td>
<td>1 in progress</td>
</tr>
</tbody>
</table>

Output 7.1:

The Ecuadorian RC is providing information through leaflets placed in all the migrant points and bus stations.

The Virtual Volunteer site was presented to the National Societies during the revision workshop in March and also at the Regional Platform Meeting. At present, the Colombian Red Cross Society will be rolling it out soon. The Ecuadorian RC already has made advances in collecting information regarding legal counselling for migration processes, messages for prevention and self-care, distance and time of the migratory route in country, climate and temperature, key services and points of interest along the route (hospitals, police stations, governmental offices, etc). It is expected that within this operation National Societies which have already gathered key information such as the ERC can roll it out soon.

In Peru, the team has designed a CEA strategy with three lines of action: information as aid, feedback mechanisms, and activities against stigma and discrimination. Information as aid includes the design of materials to promote the health post and health information about heatwaves.

The Uruguayan RC has started implementing a target population satisfaction survey with migrants reached through the provision of daily dinners (link with Livelihoods sector).

Output 7.2: In November, a CEA workshop with focus on migration for Latin American countries was held in Panama.

The leaflet used by the Ecuadorian RC was developed using migrant feedback from a first version (improved from community feedback).

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### Outcome 7: (Focus on Community Engagement and Accountability) Interventions consider and respond to community needs and priorities through a CEA strategy that ensures migrant, transit and host communities are informed, included and listened to.

<table>
<thead>
<tr>
<th>Indicators:</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of national CEA strategies developed</td>
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</table>

### Progress towards outcomes

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The Uruguayan RC has started implementing a target population satisfaction survey with migrants reached through the provision of daily dinners (link with Livelihoods sector).

Output 7.2: In November, a CEA workshop with focus on migration for Latin American countries was held in Panama.

The leaflet used by the Ecuadorian RC was developed using migrant feedback from a first version (improved from community feedback).
The initial assessments made indicate the following information and communication issues:

- Word of mouth is the main mode of communication
- Most migrants have a Facebook account and follow Facebook groups to obtain information from other people who are farther along their specific migratory route.

Peruvian RC and IFRC: The Peruvian RC, with support from the IM FACT member, collected feedback in March from 53 migrants mainly in Tumbes regarding the services received in the centre. At least 55% of those interviewed are satisfied with the assistance, 43% are very satisfied and 2% are very unsatisfied. When asked what could be improved in the CEBAF, respondents noted that more information could be made available in the centre. Migrants are most interested in finding more information about **how to find job opportunities or income generating activities**. This information is also shared with the Regional Platform’s working group so members can also use the data.

Table 2. Type of services that could be improved based on migrants’ survey results

<table>
<thead>
<tr>
<th>Service</th>
<th>Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information available in the centre</td>
<td>35</td>
</tr>
<tr>
<td>Other</td>
<td>30</td>
</tr>
<tr>
<td>Infrastructure</td>
<td>20</td>
</tr>
<tr>
<td>Cleaning</td>
<td>10</td>
</tr>
<tr>
<td>Medical attention</td>
<td>5</td>
</tr>
</tbody>
</table>

The IFRC and PRC will use the feedback to review the type of assistance provided and see what additional information or services could be added to meet migrants’ needs. Feedback questionnaires such as the one used in Peru will be implemented in other NSs with the support of the IM surge focal point.

The CEA focus in this country is to deliver information as aid at this time. Information is being delivered particularly through health campaigns (handouts). The feedback mechanism for the CEBAF in Tumbes has started and another feedback mechanism will be implemented for the health campaigns in Lima.

The initial feedback collected by the PRC in Peru also correlates with the latest data collected by IOM on migration flows from the Venezuelan population in South America (Chile, Uruguay, Brazil and Argentina) where at least 43% of migrants interviewed required more information related to income generation activities and employment.

In Uruguay, the URC has started conducting target population satisfaction surveys now with the distribution of meals (dinners) for migrants. Once the results are consolidated they will be shared in the next update.

At least one member of all the National Societies participating in the EA have received training in CEA. However, not all have a dedicated CEA focal point. In some cases, CEA actions are coordinated by the communications department. Therefore, there’s a need to reinforce National Societies’ capacities in CEA as it is one of the three **core areas of the operation**. With this in mind, the IFRC CEA delegate for the operation will join the Migration Cell Team in May. This person will be responsible for the development of the CEA strategy and plan. In the meantime, the IFRC Communications Unit in the ARO has provided support after the last rotation of the CEA surge staff.

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Output 7.3: Sensitization activities are conducted with host communities to reduce discrimination and xenophobic sentiment.

| Number of perception activities conducted with host communities to assess sentiment towards the migrant population | TBD | 0 |
| Number of activities implemented to help prevent or mitigate discrimination and xenophobia | TBD | 0 |

**Progress towards outcomes**

In many host communities, in particular along border areas, the large number of migrants is creating pressures in the local services. Thus, there is a need to engage host communities through diverse means to help prevent or mitigate discrimination and xenobia towards migrants.

### Strengthen National Society

**Outcome S.1.1:** National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competencies and capacities to plan and perform

<table>
<thead>
<tr>
<th>Indicators:</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of volunteers involved in the operation</td>
<td>At least 1,500 (^{16})</td>
<td>0</td>
</tr>
</tbody>
</table>

**Output S1.1.4:** National Societies have effective and motivated volunteers that are protected

| Number of volunteers that receive training on their role and the risks they face | TBD | 109 |
| Number of volunteers that receive psychosocial support | TBD | 19 |
| Number of new volunteers | TBD | 0 |

**Progress towards outcomes**

**Output S1.1.4:**
- Argentine RC: The migration delegate carried out a training for 8 volunteers from 8 different branches involved in the operation, focusing on the migration strategy, EPoA and budget, shelter and protection, communications, RFL, among others.
- Peruvian RC: 19 volunteers training in Lima in basic PSP and the basic module on Child-Friendly Spaces. Also, 19 volunteers and staff working on the centre in Lima received PSP.
- Uruguayan RC: Migration training conducted for 15 volunteers (7 men and 8 women) which included sessions on the Movement components, the humanitarian response cycle, IFRC emergency response tools, the regional migration framework and strategy, distribution tools and RFL. In addition, 30 volunteers were trained in distribution of humanitarian aid.

**Regional level trainings:**
- As part of the strengthening of the National Societies capacities, training has been provided in migration, protection and CEA themes to better respond to the situation affecting the region. In this sense the following trainings have been given:
  - Community engagement and accountability in November 2018, with the participation of 15 National Societies (37 participants, 5 ICRC officials and 6 facilitators)
  - Regional workshop (pilot) of the Guide for differentiated health and psychosocial support to mobile populations in December 2018, with the participation of 19 National Societies, ICRC and IFRC. This workshop was implemented under other programmes and the National Societies involved in the Regional Emergency Appeal are complementary to the process.

These trainings provide the National Societies with tools that allow them to better respond to the current situation.

\(^{16}\) Argentina: 200 volunteers; Brazil: 200 volunteers; Ecuador: 500 volunteers; Panama: 200 volunteers; Peru: 200 volunteers; Uruguay: 200 volunteers.
Output S1.1.6: National Societies have the necessary corporate infrastructure and systems in place.

| Number of migration response protocols and procedures established | TBD | 2 |

Output S1.1.7: National Society capacity to support community-based disaster risk reduction, response and preparedness is strengthened.

| Number of staff members hired | 56 | 17 |

Progress towards outcomes

Output S1.1.6: The Argentine RC has a very clear migration response strategy, which was reviewed together with the IFRC migration delegate during her visit. The ARC migration cell has defined roles and components, as well as good coordination mechanisms. This cell meets at least every 15 days, while their workload is high, the ARC has defined how to address and delegate work through the hiring of a migration officer for the timeframe of the operation, and through support from the Spanish Red Cross.

In the long-term, there is still needed to integrate the migration strategy at programming level within the national strategy of the ARC and the URC.

Output S1.1.7: The information is being compiled based on the national EPoAs to be presented in the next operations update.

The Peruvian RC has hired the following staff in the CEBAF in Tumbes and Lima to ensure service deliver:

- 2 general physicians in Tumbes (covered through IFRC).
- 2 general physicians in Lima for December (IFRC).
- 2 nurses in Tumbes (IFRC).
- 1 nurse in Lima for December (IFRC).
- 1 nurse SAMU and for the ambulance (covered by the Ministry of Health/DIRESA)
- 1 national coordinator, 1 PSP consultant and 1 logistic assistant (IFRC)

The Uruguayan RC developed the job description to hire an RFL coordinator to support all the RFL activities.

International Disaster Response

Outcome S2.1: Effective and coordinated national and international disaster response is ensured.

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Regional Intervention Team (RIT) and IFRC staff mobilized to provide support</td>
<td>TBD</td>
<td>6</td>
</tr>
</tbody>
</table>

Output S2.1.1: Effective response preparedness and National Society surge capacity mechanism is maintained

| Number of missions to support NS and/or CCST | 36 | 13 |

Progress towards outcomes

Surge support and human resources: Global Surge Capacity Response managed the deployment of three FACT personnel to the region to provide support. The following staff has been hired to support the operation at regional level: Operations Coordinator, Migration delegate, CEA delegate. Two more staff are planned to be recruited: IM focal point and PMER officer.

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17 Staff planned to support the operation at country level. This includes staff that will be partially or fully covered through the operation. Local staff needed to support field level operation in the countries include medical personal (doctors and nurses), admin and finance officers, drivers, migration, PGI and CEA specialized staff, drivers and project and field level coordinators.
Ongoing accompaniment to National Societies: All National Societies receive technical support based on their specific context. The head of operations conducted two missions (one in Peru and one in Panama) to support these National Societies in the development of their strategies. The surge CEA FACT conducted assessments of CEA needs and capacities in Ecuador and Peru.

In March, the surge IM FACT was deployed to Peru (Tumbes and Lima) to identify IM needs, set data collection forms and train volunteers. During the same month, the Migration delegate, IM FACT and PMER focal point met in Trinidad with the TTRCS and GRCS to support them in their national EPoA revision process and to identify additional needs and capacities particularly for their migration strategy, training, data collection, planning, monitoring and reporting.

<table>
<thead>
<tr>
<th>Table 3: Technical support provided through missions per National Society</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mission done</strong></td>
</tr>
<tr>
<td>General support &amp; monitoring</td>
</tr>
<tr>
<td>Assessments</td>
</tr>
<tr>
<td>Shelter</td>
</tr>
<tr>
<td>Livelihoods</td>
</tr>
<tr>
<td>Health</td>
</tr>
<tr>
<td>WASH</td>
</tr>
<tr>
<td>PGI</td>
</tr>
<tr>
<td>Migration</td>
</tr>
<tr>
<td>CEA</td>
</tr>
<tr>
<td>IM</td>
</tr>
</tbody>
</table>

Output 2.1.4: Supply chain and fleet services meet recognized quality and accountability standards

| Percentage of National Societies with enough materials in stock to carry out the planned activities | 100% | 0 |

Progress towards outcomes

Activities are on hold waiting for funds.

Output 2.1.6: Coordinating role of the IFRC within the international humanitarian system is enhanced

| Number of coordination meetings carried out within the Movement and with key external stakeholders | 12 (1 per month) | 7 |
| Number of reports on the participation of the humanitarian network and key partners | 12 | 7 |

Progress towards outcomes

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18 dot by Yaroslav Samoylov from the Noun Project.
Movement coordination meetings are held monthly. The Country Cluster Support Team in Lima and the ARO participates in United Nations platform coordination meetings. The IFRC’s ARO Migration Cell participate in all the coordination meetings of the Regional Platform, so far 7 meetings have taken place.

A regional workshop took place in Panama (11th to 15th March) to work on a common framework of intervention for all countries in the regional appeal. The workshop opened the dialogue for the long-term programmatic approach to develop as an exit strategy for the operation. During the upcoming Inter-American Conference, a Migration space will be organised to:

- share experiences of NS implementing migration operations and projects;
- establish a common programmatic framework for future work in migration in the Americas; and
- re-affirm the commitment of National Societies to work on migration issues in their countries.

Influence others as leading strategic partner

Outcome S3.1: The IFRC secretariat, together with National Societies, uses its unique position to influence decisions at the local, national and international levels that affect the most vulnerable

Output S3.1.1: The IFRC and the National Societies are visible, trusted and effective advocate on humanitarian issues.

<table>
<thead>
<tr>
<th>Indicators:</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of newsletters press releases and reports produced</td>
<td>TBD</td>
<td>2 IFRC press releases (11 web notes)</td>
</tr>
</tbody>
</table>

Output 3.1.2: The IFRC produces high-quality research and evaluation that informs advocacy, resource mobilization and programming.

- Number of monitoring and evaluation reports produced: 8, 0
- Number of research lessons learned materials and evaluations produced: At least 1, 0

Progress towards outcomes

Output 3.1.1: Six human interest stories published on IFRC website and three in the IFRC Regional Newsletter “Voices from the Americas and the Caribbean”.

The IFRC’s ARO conducts digital monitoring on migration in social media across the region. There has been a constant use of social media by National Societies and IFRC accounts to extend the scope of the messages. Between January and March 2019, 11 notes, 98 Twitter posts, 45 Instagram posts and 51 Facebook posts have been published by the IFRC and National Societies to raise awareness and advocate on the humanitarian needs migrants face as well as to bring visibility to RCRC Movement actions.

Output 3.1.2: A monitoring and evaluation (M&E) plan has been developed for this operation in Spanish and English. This M&E plan provides a common framework for National Societies and the IFRC on indicators, definitions, data collection methods, frequency and responsible persons at different levels. The M&E plan was shared with National Societies during revision process in March to obtain feedback and adjust it as needed. The national level Plans of Actions then follow the macro-structure laid out in the M&E Plan. Once the national Plans of Action are completed, the M&E plan will be updated to include the consolidated targets at country and regional levels.

The M&E plan also specifies the evaluation process for this operation. A final evaluation is planned and aligned with the IFRC’s Framework for Evaluation. Contingent upon funds, the evaluation will be tailored to the complexity of the operation (migration response, eight countries, and distinctive capacities and scope of activities per National Society). In addition, lessons learned spaces will be carried out to complement the summative evaluation process.

Outcome 3.2: The programmatic reach of the National Societies and the IFRC is expanded

<table>
<thead>
<tr>
<th>Indicators:</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of coordination spaces to exchange information to ensure optimal coordination in resource mobilization.</td>
<td>TBD</td>
<td>2</td>
</tr>
</tbody>
</table>

Output 3.2.1: Resource generation and related accountability models are developed and improved.

<table>
<thead>
<tr>
<th>Indicators:</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of partnerships built with key actors from the migration response</td>
<td>TBD</td>
<td>0</td>
</tr>
</tbody>
</table>

19 Available upon request.
Number of proposals developed and presented to potential donors | TBD | 5

**Progress towards outcomes**

The Partnerships and Resource Mobilization (PRD) department has organized two international teleconference calls with National Societies across the globe and the ICRC to discuss joint resource mobilization efforts for this response. Other coordination spaces have been organized in relation to specific funding applications. Additionally, several one-to-one meetings with members of the Movement took place to exchange information and coordinate donations to this operation, as well as other resource mobilization activities. Two donor meetings have taken place.

The Secretariat at the global, regional and local levels, undertook a series of resources mobilization activities including:

1. Engagement with donors and partners from different funding sources to present the details of the operation and possibilities of collaborations
2. Development and presentation of proposals and funding applications
3. Development and use of fundraising marketing materials including a fundraising toolkit
4. Organization of a “Donor Advisory Group” field visit in January in Colombia including representatives from governments and Partner National Societies to discuss and explain the regional humanitarian needs related to the population movement in the region.

The IFRC, on behalf of National Societies, has presented 5 proposals to ECHO, AECID and UNHCR (proposals for 3 countries). Other donors and partners have kindly donated to the appeal based on the published EA document.

**Effective, credible and accountable IFRC**

**Outcome S4.1: The IFRC enhances its effectiveness, credibility and accountability**

**Output S4.1.3:** Financial resources are safeguarded; quality financial and administrative support is provided contributing to efficient operations and ensuring effective use of assets; timely quality financial reporting to stakeholders

<table>
<thead>
<tr>
<th>Indicators:</th>
<th>Target</th>
<th>Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of financial reports published</td>
<td>5</td>
<td>2</td>
</tr>
</tbody>
</table>

**Progress towards outcomes**

As per the IFRC’s reporting guidelines for emergency operations, the IFRC will publish on its website financial reports with all its operations updates and final report for this emergency.

An ARO finance officer provided guidance to National Societies when developing their revised budgets and for financial reporting guidelines in March 2019 to ensure good reporting and accountability standards.
A revised budget will be presented jointly with the upcoming Appeal Revision. Based on the initial budget, only 26 per cent of the overall implementation needs have been covered:

**Regional Appeal coverage**

As of 22-March-2019

- Received to date: 5,926,599 CHF
- Not covered yet: 2,046,401 CHF

**Expenditure rate of current available funds**

- Unspent: 1,508,970 CHF
- Expenditure up to 28 February 2018: 537,431 CHF
Contact information
For further information, specifically related to this operation please contact:

In the National Societies
- Argentine Red Cross: info@cruzroja.org.ar
- Brazilian Red Cross: gabinete@cvb.org.br
- Ecuadorian Red Cross:
- Guyana Red Cross: guyanaredcross@yahoo.com
- Red Cross Society of Panama: crppresidencia@cruzrojadepanama.org
- Peruvian Red Cross: director.ejecutivo@cruzroja.org.pe
- Uruguayan Red Cross: presidencia@cruzroja.org.uy
- Trinidad and Tobago Red Cross Society: admin@ttcrs.org

In the IFRC regional office for the Americas:
- Iñigo Barrena, Head of the DCPRR Department: ci.barrena@ifrc.org
- Felipe Del Cid, Continental Operations Coordinator: felipe.delcid@ifrc.org
- Santiago Luengo, Migration Cell Coordinator: santiago.luengo@ifrc.org
- José Félix Rodríguez, Migration Coordinator: josefelix.rodriguez@ifrc.org
- Mauricio Bustamante, Head of Regional Logistics Unit Americas Region, mauricio.bustamante@ifrc.org
- Diana Medina, Communications Unit Manager: diana.medina@ifrc.org

For Resource Mobilization and Pledges:
- Marion Andrivet, Emergency Appeals and Marketing Senior Officer, marion.andrivet@ifrc.org

For Performance and Accountability:
- Paula Martes, Planning, Monitoring, Evaluation and Reporting Manager: paula.martes@ifrc.org

In IFRC HQ in Geneva:
- Antoine Belair, Operations Coordination Senior Officer for Disaster and Crisis (Prevention, Response and Recovery); email: antoine.belair@ifrc.org

How we work
All IFRC assistance seeks to adhere to the Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere) in delivering assistance to the most vulnerable. The IFRC’s vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.
Figure 1 Overview of basic capacities of Red Cross Societies participating in the Migration regional appeal

Number of volunteers, staff and branches at national level

- **Trinidad and Tobago Red Cross Society**
  - 220 volunteers
  - 30 staff
  - 4 branches

- **Guyana Red Cross Society**
  - 350 volunteers
  - 40 staff
  - 7 branches

- **Red Cross Society of Panama**
  - 800 volunteers
  - 80 staff
  - 23 branches

- **Colombian Red Cross Society**
  - 800 volunteers
  - 80 staff
  - 23 branches

- **Venezuelan Red Cross**
  - See current documents

- **Ecuadorian Red Cross**
  - 7,903 volunteers
  - 709 staff
  - 106 branches

- **Peruvian Red Cross**
  - 858 volunteers
  - 62 staff
  - 41 branches

- **Brazilian Red Cross**
  - 8,756 volunteers
  - 2,891 staff
  - 21 branches

- **Uruguayan Red Cross**
  - 300 volunteers
  - 30 staff
  - 16 branches

- **Argentine Red Cross**
  - 7,105 volunteers
  - 1,630 staff
  - 65 branches
Emergency Appeal

6 Month Update FINANCIAL REPORT

MDR42004 - Americas - Population Movement
Operating Timeframe: 03 Jun 2018 to 06 Sep 2019; appeal launch date: 06 Sep 2018

I. Emergency Appeal Funding Requirements

<table>
<thead>
<tr>
<th>Thematic Area Code</th>
<th>Requirements CHF</th>
</tr>
</thead>
<tbody>
<tr>
<td>AOF1 - Disaster risk reduction</td>
<td>0</td>
</tr>
<tr>
<td>AOF2 - Shelter</td>
<td>468,000</td>
</tr>
<tr>
<td>AOF3 - Livelihoods and basic needs</td>
<td>905,000</td>
</tr>
<tr>
<td>AOF4 - Health</td>
<td>1,238,000</td>
</tr>
<tr>
<td>AOF5 - Water, sanitation and hygiene</td>
<td>506,000</td>
</tr>
<tr>
<td>AOF6 - Protection, Gender &amp; Inclusion</td>
<td>487,000</td>
</tr>
<tr>
<td>AOF7 - Migration</td>
<td>835,000</td>
</tr>
<tr>
<td>SF11 - Strengthen National Societies</td>
<td>1,926,000</td>
</tr>
<tr>
<td>SF12 - Effective international disaster management</td>
<td>948,000</td>
</tr>
<tr>
<td>SF13 - Influence others as leading strategic partners</td>
<td>660,000</td>
</tr>
<tr>
<td>SF14 - Ensure a strong IFRC</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total Funding Requirements</strong></td>
<td><strong>7,973,000</strong></td>
</tr>
</tbody>
</table>

Donor Response* as per 08 Apr 2019: 2,056,291
Appeal Coverage: 25.79%

II. IFRC Operating Budget Implementation

<table>
<thead>
<tr>
<th>Thematic Area Code</th>
<th>Budget</th>
<th>Expenditure</th>
<th>Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td>AOF1 - Disaster risk reduction</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>AOF2 - Shelter</td>
<td>68,682</td>
<td>25,059</td>
<td>43,623</td>
</tr>
<tr>
<td>AOF3 - Livelihoods and basic needs</td>
<td>5,922</td>
<td>0</td>
<td>5,922</td>
</tr>
<tr>
<td>AOF4 - Health</td>
<td>147,192</td>
<td>46,579</td>
<td>100,613</td>
</tr>
<tr>
<td>AOF5 - Water, sanitation and hygiene</td>
<td>21,483</td>
<td>16,714</td>
<td>4,768</td>
</tr>
<tr>
<td>AOF6 - Protection, Gender &amp; Inclusion</td>
<td>142,263</td>
<td>2,290</td>
<td>139,973</td>
</tr>
<tr>
<td>AOF7 - Migration</td>
<td>92,125</td>
<td>114,054</td>
<td>-21,929</td>
</tr>
<tr>
<td>SF11 - Strengthen National Societies</td>
<td>314,118</td>
<td>25,474</td>
<td>288,644</td>
</tr>
<tr>
<td>SF12 - Effective international disaster management</td>
<td>382,860</td>
<td>334,175</td>
<td>48,685</td>
</tr>
<tr>
<td>SF13 - Influence others as leading strategic partners</td>
<td>12,538</td>
<td>395</td>
<td>12,143</td>
</tr>
<tr>
<td>SF14 - Ensure a strong IFRC</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Grand Total</strong></td>
<td><strong>1,187,182</strong></td>
<td><strong>564,739</strong></td>
<td><strong>622,443</strong></td>
</tr>
</tbody>
</table>

III. Operating Movement & Closing Balance per 2019/02

Opening Balance: 6,578
Income (includes outstanding DREF Loan per IV.): 2,348,889
Expenditure: -564,739
Closing Balance: 1,790,728
Deferred Income: 284,294
Funds Available: 2,075,022

IV. DREF Loan

* not included in Donor Response

<table>
<thead>
<tr>
<th>Loan</th>
<th>Reimbursed</th>
<th>Outstanding</th>
</tr>
</thead>
<tbody>
<tr>
<td>741,590</td>
<td>0</td>
<td>741,590</td>
</tr>
</tbody>
</table>
Emergency Appeal

6 Month Update FINANCIAL REPORT

MDR42004 - Americas - Population Movement
Operating Timeframe: 03 Jun 2018 to 06 Sep 2019; appeal launch date: 06 Sep 2018

V. Contributions by Donor and Other Income

<table>
<thead>
<tr>
<th>Income Type</th>
<th>Cash</th>
<th>InKind Goods</th>
<th>InKind Personnel</th>
<th>Other Income</th>
<th>TOTAL</th>
<th>Deferred Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Red Cross</td>
<td>200,061</td>
<td></td>
<td></td>
<td></td>
<td>200,061</td>
<td></td>
</tr>
<tr>
<td>British Red Cross</td>
<td>263,918</td>
<td></td>
<td></td>
<td></td>
<td>263,918</td>
<td></td>
</tr>
<tr>
<td>China Red Cross, Hong Kong branch</td>
<td>25,489</td>
<td></td>
<td></td>
<td></td>
<td>25,489</td>
<td></td>
</tr>
<tr>
<td>DREF Allocations</td>
<td>650,000</td>
<td>650,000</td>
<td></td>
<td></td>
<td>61,888</td>
<td></td>
</tr>
<tr>
<td>Italian Red Cross</td>
<td>48,159</td>
<td>13,729</td>
<td></td>
<td></td>
<td>81,888</td>
<td></td>
</tr>
<tr>
<td>Japanese Red Cross Society</td>
<td>88,843</td>
<td></td>
<td></td>
<td></td>
<td>88,843</td>
<td></td>
</tr>
<tr>
<td>Red Cross of Monaco</td>
<td>34,336</td>
<td></td>
<td></td>
<td></td>
<td>34,336</td>
<td></td>
</tr>
<tr>
<td>Spanish Government</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td>0</td>
<td>284,294</td>
</tr>
<tr>
<td>The Netherlands Red Cross (from Netherlands Govern)</td>
<td>1,024,353</td>
<td></td>
<td></td>
<td></td>
<td>1,024,353</td>
<td></td>
</tr>
<tr>
<td><strong>Total Contributions and Other Income</strong></td>
<td>1,685,160</td>
<td>0</td>
<td>13,729</td>
<td>650,000</td>
<td>2,348,889</td>
<td>284,294</td>
</tr>
</tbody>
</table>

**Total Income and Deferred Income**

2,355,467 284,294