A. Situation analysis

Description of the disaster

A massive population movement, known as a caravan, departed from San Pedro Sula, Honduras, on 14 January 2020. These migration flows have been occurring in the Central American Northern Triangle since October 13, 2018, when the first caravan of 8,500 people originating in Honduras caused a humanitarian crisis at the Guatemala-Mexico border.

Some 2,000 people, including men, women, young people, pregnant women, members of the LGBTIQ community and children, departed from San Pedro Sula on 14 January 2020. On 15 January, Guatemala's Migration Institute registered 662 individuals entering the country through the Customs Office at Corinto, Izabal and 1,612 individuals through the Customs...
Office at Agua Caliente, Chiquimula, both in north-eastern Guatemala. During the following days, the number of migrants crossing the country has increased to an estimated amount of 4,000 people, according to The Guatemalan Migration Authorities.¹

This caravan has once again made Guatemala a high-transit country. Migrants are using two main routes: one starting at the Agua Caliente border crossing in Chiquimula, continuing through Guatemala City, and ending at the southern Guatemala-Mexico border in the city of Tecún Umán in the municipality of Ayutla, San Marcos, using the CA-2 highway; and the second starting at the Corinto border crossing in Izabal department, continuing along the PET-15 highway at Km 243 to the municipality of Santa Elena, Petén and ending at the border crossing at Técnica and El Ceibo (Petén- Guatemala-Tenosique-Mexico).

Migrants travel through Guatemala either on foot or take collective buses, mostly using Casa del Migrante shelters to rest during their journeys along the route.

The Guatemalan State allows migrants to carry out the appropriate customs procedures in compliance with the Central America-4 Border Control Agreement². However, migrants who fail to comply with these processes have begun to be deported as of 16 January. Since 17 January, there has been a significant drop in migrations along the route connecting Honduras and Guatemala, although northern Guatemala-Mexico border areas have been busier than in previous mass mobilizations. In addition, the greatest number of migrants has been seen at the southern Guatemala-Mexico border - some 2,500 individuals in Tecun Umán, Ayutla, San Marcos. This border crossing has a temporary shelter managed by several civil society organizations; however, this shelter has minimum conditions, resulting in increased vulnerability and basic needs.

There is a new migrant caravan expected to leave San Pedro Sula on 30 January. It is expected that more migrants coming from Honduras and maybe from El Salvador will cross the country in the upcoming weeks. It could be possible to have an increase of returnees deported from Mexico.

² The Central America-4 Free Mobility Agreement (CA-4; Spanish: Convenio Centroamericano de libre movilidad) is a treaty signed in June 2006 between the Central American nations of El Salvador, Guatemala, Honduras, and Nicaragua, establishing the free movement across borders between the four signatory states of their citizens without any restrictions or checks.
Summary of the response

Overview of Host National Society

Aiming to prevent suffering and reduce migrants' vulnerabilities and needs, Guatemalan Red Cross (GRC), with support from the International Federation of the Red Cross (IFRC), began planning its response to the population movement reported in December 2019 by formal and informal media. In the first week of January 2020, the GRC began considering scenarios and adapting its Operational Response Plan.

Humanitarian service provision began as of 14 January when the National Society's Migration Program activated humanitarian assistance posts in two Guatemala-Honduras border crossings, and later other assistance posts along the migration route. Guatemalan Red Cross is implementing its operational plan based on lessons learned from the DREF MDRGT014 and findings from previous interventions.

The National Society has developed this DREF Plan of Action (PoA) based on its Operational Response Plan (See Annex 1) for mass population movements, the care provided so far and an analysis of the needs in border areas. As of 20 January 2020, the GRC has served 2,463 people through the following services:

- 2,395 pre-hospital care treatments
- 4,658 distributions of water for consumption
- 1,416 psychosocial support (PSS) treatments
- 44 medical treatments
- 209 psychological first-aid treatments
- 471 restoration of family links (RFL)
- 1,601 distributions of complementary food rations
- 1 transport to a hospital

The most common conditions treated through GRC’s provision of pre-hospital care are the following: dehydration, hypertension, fever, injuries to lower extremities, respiratory problems, gastrointestinal infections and dermatological diseases.

The National Society has an internal communication channel that identifies the focal points in each humanitarian assistance post, the care routes, and external communications.

Overview of Red Cross Red Crescent Movement in country

The IFRC supports Movement coordination through its Americas Regional Office (ARO) Disaster and Crisis Department, which maintains close communication with the IFRC's migration officer for the North Triangle of Central America who has been supporting the GRC during its operation.

The National Society, through the General Director, maintains constant communication with the Movement partners present in the country, the Partner National Societies (PNS) such as Spanish Red Cross and Norwegian Red Cross, the ICRC and the IFRC.

The ICRC, since the onset of the emergency, has supported the GRC through:

- The provision of pre-hospital care and medicine
- Support for GRC volunteers
- The provision of RFL services through call points

The ICRC’s support to the GRC is intended to cover the migrants' needs at the following points along their migratory route: Eastern border between Honduras-Guatemala, Guatemala City, western border (mainly) and the northern Guatemala-Mexico border. The ICRC’s teams in Guatemala, Honduras and México are coordinating with the respective National Societies to follow up on the migrants’ situation in real-time, especially their RFL and protection needs. The ICRC has begun a process of searching for information with migrants about the main protection needs on the southern border of Guatemala and Mexico.
The affected National Societies (Guatemalan Red Cross, Honduran Red Cross and Mexican Red Cross) established a regional coordination mechanism to ensure communication between them, including the ICRC and the IFRC.

Specific actions from the IFRC:
- Scenarios have been developed with the Honduran Red Cross and the Guatemalan Red Cross.
- A National action plan has been developed with the Guatemalan Red Cross.
- Coordination with Movement partners is maintained.
- Coordination is maintained between the Disaster Manager and the Regional Migration Officer for the Northern Triangle of Central America.
- Attention has begun through the Monarch Butterfly project of the Guatemalan Red Cross as of January 15th with water for consumption, medicines and first aid supplies.
- On January 19, the Regional Migration Officer for the Northern Triangle of Central America visited the Casa del Migrante shelter to conduct a needs analysis.

Overview of non-RCRC actors in country

The inter-institutional coordination has mainly been on the management of the collective centres, which has made it possible for the GRC to channel aid where it has been most needed. The following groups are aiding migrants:

<table>
<thead>
<tr>
<th>Group</th>
<th>Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNHCR</td>
<td>Dissemination of Information on migrants’ rights; monitoring observance of migrants’ human rights and coordination through the Humanitarian Protection Cluster</td>
</tr>
<tr>
<td>Pastoral of Human Mobility/Migrant House</td>
<td>Monitoring observance of migrants’ human rights and managing the collective centres. Shelter</td>
</tr>
<tr>
<td>Human Rights Ombudsman</td>
<td></td>
</tr>
<tr>
<td>Voluntary firefighters</td>
<td>Providing pre-hospital care</td>
</tr>
<tr>
<td>Doctors of the World</td>
<td>Monitoring the situation and working in coordination with Guatemala’s Ministry of Health.</td>
</tr>
<tr>
<td>Civil Society Organizations</td>
<td></td>
</tr>
<tr>
<td>Corazón Migrante</td>
<td>Food supplies.</td>
</tr>
<tr>
<td>The Guatemalan Civil Society Migration Group</td>
<td>Issuing statements and holding press conferences on migrants’ rights</td>
</tr>
<tr>
<td>Guatemalan Government</td>
<td>Medical provided through the Ministry of Public Health and Social Assistance.</td>
</tr>
<tr>
<td>UNICEF</td>
<td>Monitoring the situation.</td>
</tr>
</tbody>
</table>

The National Society coordinates with the State of Guatemala through the President and the General Director, directly in the working group of the vice-presidency of the nation, coordinating with the Ministry of Public Health of Guatemala and the National Coordinator for Disaster Reduction (CONRED). The last meeting coordination between Civil Society Organizations, Government, United Nations, and the GRC was held on January 17. The National Society, at the request of the Ministry of Health, has supported the management of a shelter of the Human Mobility Pastoral "Casa del Migrante" in the capital city for 48 hours.

GRC is providing pre-hospital care for migrants entering the “Safe Return” process, in coordination with the CONRED who, together with the Guatemalan National Civil Police, is responsible for the return program from Guatemala to Honduras.

Needs analysis and scenario planning

Needs analysis

Shelter
Civil society organizations, in coordination with the Pastoral de Movilidad Humana and the UNHCR, have set up a temporary shelter in the city of Tecún Umán in the municipality of Ayutla, San Marcos which has given refuge to more than 2,200 migrants and, which does not have all the necessary services or adequate management. The GRC conducted a needs assessment of this shelter on the southern border. Health and wash and hygiene promotion were identified as urgent needs to be addressed.

The shelter has two water tanks of approximately 2,500 liters capacity located at different points. These supply water do not have any treatment or management of distribution after the supply. Most of the water is used for portable showers (three for women and three for men), which are not enough for the number of migrants housed.

Another priority need is the promotion of hygiene and health care. The Ministry of Public Health and Social Assistance have a medical care module within the shelter, but the services have been suspended due to lack of personnel and shortage of funds. The National Society will seek to respond to these needs through the appropriate focus areas, as described below.

Health

The migrants’ journey north under precarious conditions has greatly impacted their physical and mental health; factors such as seasonal rains, unsuitable clothing and footwear, dehydration, overcrowding in collective centres and lack of protection increase the migrants’ level of vulnerability.

Many migrants suffer from health conditions such as dehydration, high blood pressure, injuries to their lower extremities, respiratory problems, gastrointestinal infections, dermatological diseases and a demand of sexual and reproductive health services. It has also been observed that the separation of families, the difficulties present during their migratory journey and the uncertainty of what to expect once they reach their destination has affected migrants psychologically (depression, anxiety and sleep disturbances, among other conditions).

Another priority targeted group are women. Considering the findings of the recent research called “Normalizacion y violencia” led UNFPA with regards to the risks for migrant women in Guatemala, the migrant women are highly exposed to different variety of violence and vulnerabilities.

Therefore, the GRC has carried out a series of interventions in first aid, pre-hospital care and psychosocial support (PSS). Additionally, the National Society will carry out PSS activities with the GRC volunteers that are participating in the operation to protect their mental health.

The distribution of complementary food rations have been considered for the most vulnerable migrants to cover their basic nutrition needs and to contribute to their wellness and health. The criteria of the most vulnerable migrants follow the information stated at the targeting section below.

It is important to strengthen PSS interventions, focusing on reducing stress in adults responsible for minors through the proper management of stress in children during the trip, considering that this is a priority care group and that there are no other actors working under this approach. To conduct this activity the NS will distribute recreational kits, which will be delivered to children of less than 11 years of age. For the content of the recreational kits, see Annex 2.

Water, sanitation and hygiene

Some of the migrants have suffered from dehydration due to their exposure to high temperatures. Furthermore, to satiate their thirst, some migrants have consumed water from unsafe sources, putting them at risk of contracting waterborne illnesses or other water-related diseases.

There is a lack of access to safe water, so GRC in coordination with UNHCR and CONRED plans the provision of filters to Tecun Uman's shelter to provide potable water, as a preventive measure for future mobilizations of migrant populations.

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3 Normalizacion y Silencio Mujeres Migrantes Guatemala
Also, GRC will distribute bottled water in service posts at the border with Honduras and delivery of hygiene kits at the service posts in La Técnica, El Ceibo and Santa Elena, Petén, Km 243 and border at Corinto, Izabal, Agua Caliente, Chiquimula, Tecún Umán, Ayutla San Marcos and Quetzaltenango. These will be distributed to the population according to previously determined selection criteria.

The hygiene kits will ensure that families – particularly women and children – can meet their personal care and hygiene needs. The content of the hygiene kits will be differentiated for men and women concerning their specific hygiene needs. See Annex 3 for the list of the items contained in the hygiene kits.

Showers will be made available at the Tecún Umán, Ayutla, San Marcos branch, which will involve maintenance or purchasing spare parts for proper operation to ensure safe cleanliness. The setup and the services of the showers will follow the Sphere minimum standards and the Protection Gender and Inclusion IFRC guidelines.

Migration

In these types of emergencies, families become separated from their loved ones, requiring the provision of RFL services to keep families intact and ensure that communication is maintained between their members. Some of the people lose their mobile phone accessories, such as chargers and connecting wire, during transit.

Likewise, the GRC will implement the strategy of providing power banks that include charging cables to some migrants who need them. This is a strategy that the National Society and the Monarch Butterfly Program have been working on, the idea is to provide this service to migrants who meet certain criteria, such as the need to stay connected at all times for health issues, mothers who travel with sick children, and those migrants who have lost their telephone accessories that allow them to stay connected not only with their families but also with health care centres. These power banks will include a printed Whatsapp number from the ICRC to request self-care information.

Due to the nature of this emergency, the National Society, together with the International Committee of the Red Cross will continue to provide RFL services such as phone calls, conduct searches for individuals and facilitate family reunification. Still, with this operation, the NS will extend its services to offer contact calls for a more extended period and mainly promote the RFL services.

It has been identified that many of the migrants are not aware of the RFL services offered by the National Society, so a promotion campaign for the services provided has been considered.

Institutional Strengthening

Although the National Society has increased its capacities on migration issues in the last year, and in the framework of the previous DREF operation of the Population Movement, together with other migration projects, including the Monarch Butterfly Project, constant capacity building to volunteers is necessary.

Targeting

GRC is committed to providing care to all people in mobility, regardless of nationality; however, priority is given to certain groups such as:

- Pregnant or nursing women.
- People with disabilities
- Older adults.
- Children and unaccompanied minors.
- Members of the LGBTIQ community
- Single-parent families.
- People with chronic illnesses.
Operation Risk Assessment

Based on the lessons learned from the first caravan and the new conditions that have arisen in recent weeks regarding the migration flow from Honduras (for summary of the lessons learned see the PMER section below), the GRC has identified the following possible scenarios as part of its Response Plan to deal with the new increase in the number of migrants passing through Guatemala:

Scenario 1.

Minimal increase in the number of migrants entering the country, as few responded to the call for 15 January. The response teams in the field remain active and the progress of smaller groups is monitored.

Scenario 2.

Movement by more than one caravan of migrants at different times, which may decide to take different routes in order to avoid controls or dangers reported by people who attempted to cross the border before them. In this scenario, there may be migrant populations that decide to remain for longer periods of time in different parts of the country before continuing their journey.

Scenario 3.

Caravans of more than 10,000 people entering Guatemala periodically and through irregular border crossings. In this scenario, the following situations could potentially arise:

- Militarization of borders (Honduras, El Salvador, Guatemala and Mexico)
- Clashes between migrants and border military police
- Family separations
- Child trafficking
- Impact to migrants' physical, mental and psycho-emotional health.
- Lack of capacity in Guatemala to meet the basic needs of the migrant population.
- Radical decisions by the Governments of Honduras, Guatemala and Mexico (border closures)
- Population stranded in one location for several days would lead to xenophobia-related situations among residents, especially in Ayutla, San Marcos and Guatemala City.
- Stress and despair increase the levels of vulnerability among the migrant population, who become easy targets for common crime, fraud, extortion, others.

IMPORTANT: It is necessary to consider that if the population that has crossed into Guatemala and Mexico decides to return home, the wave of returnees could also affect host populations.

B. Operational strategy.

Based on the scenario and experience of the DREF MDRGT014 in 2018 and 2019, the work coordinated with the Movement and the National Action Plan, Guatemalan Red Cross aims to continue providing humanitarian assistance in line with its Plan of Action and with Health, WASH and Migration services. Through this operation, the National Society seeks to continue to provide care and conduct new actions to assist migrants following the Fundamental Principles of the Red Cross and Red Crescent Movement and the Global and Regional Migration Strategy.

Proposed Strategy

All actions will be carried out per the established role of the National Society's humanitarian mandate in the country and the international regulations of the Red Cross Movement linked to this context and in line with the global migration strategy. The main idea is for GRC to continue with its auxiliary role to public authorities, providing humanitarian assistance through its assistance posts, active shelters and coordinated work with its branches. The National Society seeks to continue promoting coordinated actions with the institutions present in the areas, within its plan of action and without assuming the responsibilities of the relevant entities. The proposed lines of intervention are:

- Health
- Water, sanitation and hygiene
- Migration
- Institutional strengthening.

Considering that the situation at each post is different, activities will be developed according to the following table:

<table>
<thead>
<tr>
<th>ACTIVITY</th>
<th>Tecun Umán</th>
<th>Quetzaltenango</th>
<th>Chiquimula</th>
<th>Izabal</th>
<th>Petén</th>
<th>Guatemala City</th>
</tr>
</thead>
<tbody>
<tr>
<td>Restoring Family Links (RFL - ICRC)</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>PSS</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Health promotion and hygiene</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Water distribution</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Water treatment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Distribution of hygiene kits</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre-hospital care</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Strengthening volunteer staff's capacity and knowledge regarding Plan of Action lines.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

**Human resources**

The GRC has informed its 1,680 volunteers of the situation and alerted its 21 branches. The volunteers supporting the operation have the necessary profiles, essential security, and visibility materials to carry out safely this operation. The GRC plans to mobilize nine branches and 75 volunteers. On top of that, GRC will mobilize 19 staff from the GRC migration program.

To properly conduct the work, it will be necessary to deploy a General RIT to assist the GRC’s National Technical Team with administrative and field actions for 60 days. Also, an administrative, technical assistant will be hired for the duration of the operation.

**Logistics and supply chain**

Logistics activities aim to effectively manage the supply chain, including mobilization, procurement, customs clearance, fleet, storage, and transport to distribution sites per the operation’s requirements and aligned to the IFRC’s logistics standards, processes and procedures.

All procurement related to this operation will follow the IFRC’s standards procurement procedures and Sphere standards for non-food item (NFI) purchases. GRC’s supply of items and services will meet the required conditions based on the needs of the affected population and/or the operational areas to guarantee the appropriate level of supplies and optimal performance.

All GRC’s purchases will be made in-country, with the support of a procurement officer from ARO’s Regional Logistics Unit (RLU) in Panama.

**Information Technology (IT)**

The GRC’s branches use a 2-metre and an 11-metre radio communications system at the national level, which allow for communication and the coordination of all operational and security aspects.

The GRC has no plans to buy any communication materials for this operation.
Communications

The GRC’s organizational structure includes a Communications and Press Department, which is responsible for the dissemination of operational, institutional and technical information, as well as information for donors and the public. From the beginning of the emergency, the GRC’s communications team has deployed its communications team along the migratory route to talk to the migrants, develop beneficiary stories and cover the situation. It is important that all actors who participate directly or indirectly in deployments have the operational plan, the mandate and the Red Cross and Red Crescent’s Movement Fundamental Principles; therefore, the strategy includes the issuing of a bulletin that will widely disseminate the National Society's position and efforts.

The IFRC’s Communications Department is providing technical support and assistance to the communications strategy, and its communications officer will be deployed as necessary to support these activities.

The GRC will issue press releases as events develop, send them to national media outlets and upload them to its social networks and its institutional website. At the country level, the GRC will use its social networks, its website and the media (dashboard) to disseminate information about the operation.

The CEA component is included under the communication campaign. The volunteers will be trained on Protection and Migration elements. CEA will be part of the Protection and Migration workshops for the 75 volunteers that will be involved in this operation. From one side, the CEA component is part of the institutional strengthening for the volunteers that will carry out the proposed activities under the DREF operation. In addition, the volunteers will have the chance to put in practice CEA component through the engagement with migrants in terms of the communication deliverables under the communication campaign. This action will enable the possibility of getting a wider understanding of their concerns and needs of support.

Security

The GRC will develop a security mission contingency plan based on Stay Safe, the Safer Access framework and the safety protocols and procedures; all deployed GRC personnel will be made aware of these safety guidelines. The National Society is in the process of strengthening its security situation/position, and it will require assessment, analysis and support as the situation progresses.

For a comprehensive institutional strengthening, it is imperative to ensure the Duty of Care by reinforcing the safety and security of Guatemalan Red Cross volunteers through pragmatic operational security and Civil Military Relations (CMR) training within the framework of population movement. The aim is to establish operational security and CMR training for the participation of the headquarters and in the branches that work with transit and host communities such as San Marcos and Peten, among others, while ensuring coordination in complementarity with the Safer Access Framework.

It is important to see security as a cross-cutting element in the protection of both volunteers and staff, taking into account that these are places of population movement where there is also a high level of crime, drug trafficking and human trafficking that end up being a risk for both the population on the move and for humanitarian workers. In addition to institutional strengthening through workshops on security and civil-military relations, within this operation, a product of the National Society should seek to validate the recently completed Security Plan for its dissemination and permanent application.

Planning, monitoring, evaluation and reporting (PMER)

The GRC’s migration coordinator is responsible for implementing the plan, in coordination with other GRC directors. The IFRC will continuously monitor and hold meetings with the GRC to keep abreast of the planned actions' progress and the situation's evolution, and IFRC technical staff will also conduct monitoring visits during the operation.

The scenario is continuously changing, and constant monitoring will help assess the need to expand the area of intervention.

The National Society has developed a system that keeps a daily record of people reached and services provided, which allows better monitoring of the database and the sum of the scope of the operation.
Previous lessons learned experiences (DREF MDRGT014 and findings from previous interventions) had stated the need to build volunteers' capacity through the implementation of low-cost, high-impact activities at the local level, including:

- Awareness-raising or refresher activities for hired and volunteer staff in the active branches (as deemed necessary by each).
- Basic knowledge of PGI (briefing sessions for volunteers and staff)
- Update on migratory contexts (Including contingency plans for this type of emergencies)
- Psychosocial support through primary PSS
- Stress management and PSS for volunteer staff.
- Lessons learned workshop with branches involved.
- Hiring of a person to be responsible for implementing the DREF Plan of Action, for three months.
- Hiring a person with administrative and financial experience who support the migration and procurement unit in streamlining the acquisition processes according to IFRC procedures.

**Administration and Finance**

This operation's administrative and financial procedures are in line with the GRC's quality control procedures, and they will strengthen all the GRC's actions included in its humanitarian mission, ensuring transparency and adequate accountability. The GRC's Management and Finance Unit will support the operation.

Through the Monarch Butterfly Programme, the Central American cluster will provide a workshop on IFRC financial processes to the Migration team, in support of the operation. The workshop will be delivered by the Cluster's Finance officer. Furthermore, the IFRC's in-country office will also support the administrative and financial management processes, and ARO will provide support to ensure compliance with established quality standards.
C. Detailed Operational Plan

Health
People targeted: 2,500
Male: 1,500
Female: 1,000
Requirements (CHF): 40,019

Needs analysis: As has been seen in previous mass mobilizations, travel in a caravan increases the vulnerabilities of migrants, because of the uncertain path taken and the conditions of the journey, the circumstances have greatly impacted their physical and mental health; factors such as seasonal rains, unsuitable clothing and footwear, dehydration, overcrowding in collective centres and lack of protection increase the migrants’ level of vulnerability, affecting both children and adults.

Many migrants suffer from health conditions such as dehydration, high blood pressure, injuries to their lower extremities, respiratory problems, gastrointestinal infections, and dermatological diseases. It has also been observed that the separation of families, the difficulties present during their migratory journey, and the uncertainty of what to expect once they reach their destination has affected migrants psychologically (depression, anxiety, and sleep disturbances, among other conditions). Therefore, the GRC has carried out a series of interventions in first aid, pre-hospital care, and PSS. Additionally, the National Society will carry out PSS activities with the GRC volunteers that are participating in the operation to protect their mental health.

The humanitarian cluster of protection of Guatemala has announced among the priority needs of migrants, is food, since many of the migrants suffer from gastrointestinal problems and dehydration due to lack of food. It is essential that during the route, migrants, in addition to being hydrated, can obtain the necessary heat energy to reduce their vulnerability.

Population to be assisted: The GRC will provide health assistance for 90 days; if needed, the GRC can extend the duration of the activity with other funds. The assisted population will be anyone in need that is part of the migrant caravan. The pre-hospital care and first aid are maintained as a permanent service at the humanitarian Services Points through the three-months timeframe of the operation.

The activities that are going to be carried out of PSS in the shelters are not psychosocial care activities that require trained psychologists, but “psychosocial accompaniment” activities that can be provided by trained volunteers. Psychosocial care activities are provided by the Monarch Butterfly team in the NS, who are trained for this purpose. Recreational kits will be provided for children (PSS kits: “Having fun on the road”) to reduce stress.

Programme standards/benchmarks: The GRC will use the parameters of PAHO, the World Health Organization (WHO) and the Guatemalan Ministry of Health as a reference for its health actions.

<table>
<thead>
<tr>
<th>P&amp;B Output Code</th>
<th>Health Outcome 1: The immediate risks to the health of affected populations are reduced</th>
<th># of people reached with health activities</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Target: 2,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td># people reached through PSS actions</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Target: 500</td>
</tr>
<tr>
<td></td>
<td></td>
<td># of ambulances supporting the operational activities</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Target: 8</td>
</tr>
</tbody>
</table>
### Water, sanitation and hygiene

**People targeted:** 2,000  
**Male:** 1,300  
**Female:** 700  
**Requirements (CHF):** 57,400

**Needs analysis:** Some of the migrants have suffered from dehydration due to their exposure to high temperatures. Furthermore, to satiate their thirst, some migrants have consumed water from unsafe sources, putting them at risk of contracting waterborne illnesses or other water-related diseases. Principally the border shelters do not have...

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#### Activities planned

<table>
<thead>
<tr>
<th>Health Output 1.1: Target population is provided with rapid medical management of injuries and diseases</th>
<th>Health Output 1.2: Psychosocial support provided to the target population</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Activities planned</strong></td>
<td><strong>Activities planned</strong></td>
</tr>
<tr>
<td><strong>Week</strong></td>
<td><strong>Week</strong></td>
</tr>
<tr>
<td>AP022</td>
<td>AP023</td>
</tr>
<tr>
<td>Provision of basic medical care and basic medicine to the migrant population through qualified personnel from GRC’s branches and humanitarian services points.</td>
<td>Provide PSS kits to migrants on HSP and shelters</td>
</tr>
<tr>
<td>Mobilization of volunteers to humanitarian services points along the migratory route.</td>
<td>PSS Kits to migrants’ kids</td>
</tr>
<tr>
<td>Mobilization of ambulances to the migratory route and the collective centres including branches and shelters</td>
<td></td>
</tr>
<tr>
<td>Transfer of patients to hospitals/health centres.</td>
<td></td>
</tr>
<tr>
<td>Provide to migrant’s complementary food rations in the Humanitarian services points and shelters</td>
<td></td>
</tr>
</tbody>
</table>

---

### Table for Health Output 1.1

<table>
<thead>
<tr>
<th>Parameters</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td># of active GRC volunteers providing support to operational activities</td>
<td>75 volunteers activated and giving support</td>
</tr>
<tr>
<td># of complementary food rations delivered</td>
<td>3,500 items</td>
</tr>
</tbody>
</table>
clean water, or the number of toilets and showers needed to provide hygiene to migrants. Many migrants travel without any cleaning supplies and hygiene standards need to be promoted to prevent the spread of disease.

**Population to be assisted:** The GRC will provide WASH assistance for 60 days; if needed, the GRC can extend the duration of the activity. Currently, priority is given to shelters and places where migrants are concentrated, such as temporary shelters and return stations. The assisted population will be anyone in need that is part of the migrant caravan.

It is planned to distribute bottled water in the first two months and work on rehabilitating the water systems to provide a sustainable solution for safe water. Water treatment is provided only for the temporary shelters set up on the border, Peten (northern border), and San Marcos (southern border). The water distribution is maintained on the route and all service points.

**Programme standards/benchmarks:** The activities implemented under this section will comply with Sphere standards.

<table>
<thead>
<tr>
<th>P&amp;B Output Code</th>
<th>WASH Outcome 2: Immediate reduction in risk of waterborne and water related diseases in targeted communities</th>
<th># of people that receive safe water distribution services. Target: 2000</th>
</tr>
</thead>
<tbody>
<tr>
<td>WASH Output 2.1.: Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population</td>
<td># of water units distributed for human consume Target: 4,000 # of people reached by the distribution of water for hygiene and purification Target: 2,000</td>
<td></td>
</tr>
<tr>
<td><strong>Activities planned</strong></td>
<td><strong>Week</strong></td>
<td><strong>1</strong></td>
</tr>
<tr>
<td>AP026</td>
<td>Distribution of water in recyclable plastic bottles</td>
<td></td>
</tr>
<tr>
<td>AP026</td>
<td>Purchase of water filters</td>
<td></td>
</tr>
<tr>
<td>AP026</td>
<td>Rental of showers and portable latrines</td>
<td></td>
</tr>
<tr>
<td>AP026</td>
<td>Purchase of water tanks for shelters</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>P&amp;B Output Code</th>
<th>WASH Outcome 2.2: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population</th>
<th># of hygiene promotion material Target: 500 # hygiene items distributed Target: 5,500</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Activities planned</strong></td>
<td><strong>Week</strong></td>
<td><strong>1</strong></td>
</tr>
<tr>
<td>AP026</td>
<td>Printing of IEC hygiene promotion materials</td>
<td></td>
</tr>
<tr>
<td>AP026</td>
<td>Distribution of personal hygiene kits to migrants (man 600, women 400 y 500 children)</td>
<td></td>
</tr>
</tbody>
</table>
**Needs analysis:** Given the nature of a population movement emergency, there are cases of families separated during the migratory journey and the loss of communication with family members in the country of origin, among other communications issues. Consequently, with support from the ICRC, the GRC must provide RFL services to the migrant that require them. Likewise, ensuring the protection of migrants on the route is essential, so providing relevant information on risks and reducing their vulnerabilities is a priority. Currently, the receiving communities, mainly at the borders where migrants are stranded, show some discontent, so it is prudent the NS help actions of awareness and communication.

**Population to be assisted:** The National Society, with the technical support of the ICRC, provides RFL services to all migrants (total target of 500 call services, including Family reunification, 500 cell phone charging services) seeking to maintain contact with their families, with priority given to ensuring that they understand the need to stay in touch and located. One campaign to promote RFL services will be implemented at all the GRC’s humanitarian services points, to reach as many migrants in transit as possible. As well as one campaign directed to the population, focused on reducing the stigma and discrimination of migrants. 2,500 self-care messages will be delivered to migrants in transit and return.

**Programme standards/benchmarks:** The ICRC’s RFL standards.
### Strategies for Implementation

#### Requirements (CHF): 51,262

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

<table>
<thead>
<tr>
<th>P&amp;B Output Code</th>
<th>Activities planned</th>
<th>Week / Month</th>
</tr>
</thead>
<tbody>
<tr>
<td>AP040</td>
<td>Ensure that volunteers are insured</td>
<td>1 2 3 4 5 6 7 8 9 10 11 12</td>
</tr>
<tr>
<td>AP040</td>
<td>Briefings for volunteers on Protection and Migration issues</td>
<td></td>
</tr>
<tr>
<td>AP040</td>
<td>Safety workshop for staff and volunteers participating in the operation</td>
<td>5 6 7 8 9 10 11 12</td>
</tr>
<tr>
<td>AP040</td>
<td>Lessons learned workshop</td>
<td></td>
</tr>
</tbody>
</table>

**Output S1.1.6: National Societies have the necessary corporate infrastructure and systems in place**

<table>
<thead>
<tr>
<th>P&amp;B Output Code</th>
<th>Activities planned</th>
<th>Week / Month</th>
</tr>
</thead>
<tbody>
<tr>
<td>AP042</td>
<td>Hiring an operation support technician</td>
<td>1 2 3 4 5 6 7 8 9 10 11 12</td>
</tr>
<tr>
<td>AP042</td>
<td>Hiring a financial administrative technician for the operation</td>
<td></td>
</tr>
</tbody>
</table>

**Outcome S2.1: Effective and coordinated international disaster response is ensured**
## Output S2.1.1: Effective response preparedness and NS surge capacity mechanism is maintained

<table>
<thead>
<tr>
<th>Code</th>
<th>Activities planned</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
<th>11</th>
<th>12</th>
</tr>
</thead>
<tbody>
<tr>
<td>AP046</td>
<td>RIT deployment to support the operation actions</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td>AP046</td>
<td>IFRC monitoring visits</td>
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<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
D. Budget

Please see the attached Budget.

Contact information

For further information, specifically related to this operation please contact:

In the Guatemalan Red Cross:
- Daniel E. Javiel Orellana, General Director, Guatemalan Red Cross; phone: +502 23816515; email: direcciongeneral@cruzroja.gt

In the IFRC regional office for the Americas:
- Gonzalo Atxaerandio, Disaster Manager, IFRC phone: +507 63790646; mail: gonzalo.atxaerandio@ifrc.org
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- Diana Medina, Communications Unit Manager for the Americas, phone: +507 6780-5395; email: diana.medina@ifrc.org
- Paula Martes; Planning, Monitoring and Reporting Team Coordinator; phone: +507 317-3050; email: paula.martes@ifrc.org

In Geneva:
- Eszter Matyeka, DREF Senior Officer; email: eszter.matyeka@ifrc.org
- Antoine Belair; Operations Coordination Senior Officer; 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).

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.

IFRC’s work is guided by Strategy 2020 which puts forward three strategic aims:
1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.
2. Enable healthy and safe living.
3. Promote social inclusion and a culture of non-violence and peace.
<table>
<thead>
<tr>
<th>Output Code</th>
<th>Name in financial system (TBC)</th>
<th>Multilateral Response</th>
<th>Budget CHF</th>
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<tbody>
<tr>
<td>APR005</td>
<td>Shelter assistance to households</td>
<td>0</td>
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<tr>
<td>APR006</td>
<td>Shelter tech. support and awareness</td>
<td>0</td>
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</tr>
<tr>
<td><strong>Total Shelter</strong></td>
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<td>0</td>
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<tr>
<td>APR007</td>
<td>Improvement of income sources</td>
<td>0</td>
<td>0</td>
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<tr>
<td>APR008</td>
<td>Livelihoods assistance</td>
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<tr>
<td>APR009</td>
<td>Food production &amp; income generation</td>
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<tr>
<td>APR010</td>
<td>Multipurpose cash grants</td>
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<tr>
<td><strong>Total Livelihoods &amp; basic needs</strong></td>
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<td>APR011</td>
<td>Health services to communities</td>
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<td>Voluntary blood donation</td>
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<td>Nutrition</td>
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<td>APR021</td>
<td>Other infectious diseases</td>
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<td>Health in emergency</td>
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<td>31,555</td>
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<td>Psychosocial support</td>
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<td>8,465</td>
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<td>APR024</td>
<td>Immunization activities</td>
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<td>APR025</td>
<td>Health needs in complex settings</td>
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<tr>
<td>APR026</td>
<td>Access to safe water</td>
<td>0</td>
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</tr>
<tr>
<td>APR027</td>
<td>Treatment/reuse of wastewater</td>
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<tr>
<td>APR028</td>
<td>Reduction of open defecation</td>
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<tr>
<td>APR029</td>
<td>WASH knowledge and best practice</td>
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<td>Hygiene promotion</td>
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<td><strong>Total WASH</strong></td>
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<td>Equitable access to services</td>
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<td>Social inclusion-equitable status</td>
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<td>APR033</td>
<td>Interpersonal violence pre/response</td>
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<td>Response to SGBV in emergencies</td>
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<tr>
<td>APR035</td>
<td>WVP education and advocacy programs</td>
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<td><strong>Total Protection, Gender and Inclusion</strong></td>
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<td>Migration assistance and protection</td>
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<td>APR037</td>
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<td><strong>Total Migration</strong></td>
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<td>15,108</td>
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<td>NS organisational capacity assessment</td>
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<td>NS volunteering development</td>
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<tr>
<td><strong>Total Strengthening National Societies</strong></td>
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<td>IFRC surge capacity</td>
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<td>Integrated services for NS</td>
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<tr>
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<td>0</td>
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<tr>
<td>APR050</td>
<td>Supply chain and fleet services</td>
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<td>0</td>
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<tr>
<td>APR051</td>
<td>Movement coordination</td>
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<tr>
<td>APR052</td>
<td>Movement shared services</td>
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<tr>
<td><strong>Total Influence others as leading strategic partner</strong></td>
<td></td>
<td>21,888</td>
<td>21,888</td>
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<tr>
<td>APR053</td>
<td>Advocacy on humanitarian issues</td>
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<td>IFRC policies and positions</td>
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<td>APR057</td>
<td>Support to NS in policy &amp; advocacy</td>
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<td>APR058</td>
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<td>Resource generation</td>
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<td>Emergency fundraising excellence</td>
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<td>NS resource and partnership dev.supp</td>
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<td>Financial management</td>
<td>0</td>
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<td>APR065</td>
<td>Administration</td>
<td>0</td>
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</tr>
<tr>
<td>APR066</td>
<td>Staff security</td>
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<tr>
<td><strong>Total Influence others as leading strategic partner</strong></td>
<td></td>
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<td>0</td>
</tr>
<tr>
<td>Programmes and Supplementary Services Recovery</td>
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<tr>
<td><strong>Total INDIRECT COSTS</strong></td>
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<tr>
<td><strong>TOTAL BUDGET</strong></td>
<td></td>
<td>174,436</td>
<td>174,436</td>
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</tbody>
</table>
OBJETIVO GENERAL
Brindar asistencia humanitaria a la población migrante de paso por Guatemala, en localidades específicas de la ruta migratoria de acuerdo con la modalidad de tránsito determinada.

PLAN DE COBERTURA
Se coordinará la participación de Delegaciones CRG en los siguientes puntos:

<table>
<thead>
<tr>
<th>#</th>
<th>RUTA</th>
<th>DELEGACIÓN</th>
<th>PUESTOS DE ATENCIÓN HUMANITARIA</th>
<th>RECURSOS NECESARIOS</th>
<th>TALENTO HUMANO⁴</th>
<th>SOPORTE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>1</td>
<td>Chiquimula</td>
<td>Frontera Agua Caliente</td>
<td>MATERIALES</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Toldo, insumos APH, kit RCF, hidratación</td>
<td></td>
<td>3 voluntarios locales</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3 facilitadores locales</td>
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<tr>
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<td></td>
<td></td>
<td></td>
<td>6 personal de apoyo</td>
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<td>2 personal APS</td>
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<td>Casa del Migrante “Esquipulas”</td>
<td>MATERIALES</td>
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<td>Insumos APH, kit RCF</td>
<td></td>
<td>2 voluntarios locales</td>
</tr>
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<td>Puesto de Socorro de ingreso a Zacapa</td>
<td>MATERIALES</td>
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<td>Toldo, insumos APH, kit RCF, hidratación</td>
<td></td>
<td>2 voluntarios</td>
</tr>
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<td></td>
<td></td>
<td></td>
<td>Puesto de socorro en Teculután Zacapa</td>
<td>MATERIALES</td>
<td></td>
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<td>Toldo, insumos APH, kit RCF, hidratación</td>
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<td>2 voluntarios</td>
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<td>Sede Central</td>
<td>Atención móvil Centra Norte</td>
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<td>Insumos APH, kit de higiene, hidratación, kit RCF</td>
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<td>3 voluntarios</td>
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<td></td>
<td></td>
<td></td>
<td>1 facilitador local</td>
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<td>Casa del Migrante</td>
<td>MATERIALES</td>
<td></td>
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<td>Insumos APH, kit de</td>
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<td></td>
<td></td>
<td>higiene, hidratación, kit RCF</td>
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⁴ Basados en las lecciones aprendidas de los movimientos poblacionales anteriores, se recomienda rotación de voluntarios proporcional a la carga laboral que se desempeñe en el puesto de atención.
<table>
<thead>
<tr>
<th>Ruta 3</th>
<th>Mazatenango</th>
<th>Puesto de socorro Gasolinera Shell de El Triángulo</th>
<th>Toldo, Insumos APH, kit RCF, hidratación</th>
<th>5 voluntarios</th>
<th>Ambulancia local</th>
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<tbody>
<tr>
<td></td>
<td>Coatepeque</td>
<td>Puesto de socorro entrada principal a Coatepeque</td>
<td>Toldo, Insumos APH, Kit RCF, hidratación</td>
<td>5 voluntarios</td>
<td>Ambulancia local</td>
</tr>
<tr>
<td></td>
<td>Tecún Umán</td>
<td>Frontera Tecún Umán</td>
<td>Toldo, Insumos APH, Kit RCF, hidratación</td>
<td>20 voluntarios</td>
<td>Ambulancia local (1) vehículo operativo (1)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Delegación Tecún Umán</td>
<td>Insumos APH, Kit RCF, hidratación</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Izabal</td>
<td>Frontera Corinto</td>
<td>Toldo, Insumos APH, Kit RCF</td>
<td>3 voluntarios</td>
<td>Vehículo operativo (1) Moto cicleta operativa (1)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Puesto de socorro Km. 243 Morales</td>
<td>Toldo, Insumos APH, Kit RCF, Hidratación</td>
<td>4 facilitadores</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Petén</td>
<td>Punto de socorro Santa Elena</td>
<td>Insumos APH Kit RCF, Kit de higiene, Hidratación</td>
<td>2 facilitadores</td>
<td>Vehículo operativo (1) Ambulancia (1) Moto cicleta operativa (1)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Puesto de atención Frontera La Técnica</td>
<td>Insumos APH Kit RCF, Kit de higiene, Hidratación</td>
<td>2 facilitadores</td>
<td></td>
</tr>
</tbody>
</table>

Los puestos de atención humanitaria serán activados según se presenten las necesidades alineados a los escenarios planteados.

<table>
<thead>
<tr>
<th>Otros insumos para la atención en los Puestos de Atención Humanitarios</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Meriendas (para migrantes)</td>
</tr>
<tr>
<td>• Kits lúdicos para niños</td>
</tr>
<tr>
<td>• Kits de apoyo psicosocial</td>
</tr>
<tr>
<td>• Medicamentos</td>
</tr>
<tr>
<td>• Protector solar y repelente</td>
</tr>
<tr>
<td>• Alimentación para voluntarios</td>
</tr>
<tr>
<td>• Hidratación para voluntarios</td>
</tr>
<tr>
<td>• Visibilidad para voluntarios</td>
</tr>
<tr>
<td>• Hospedaje para voluntarios</td>
</tr>
</tbody>
</table>
Resumen Operativo:
- 3 Rutas.
- 7 Delegaciones.
- 14 Puestos de atención
- 70 personas
- 6 ambulancias
- 6 vehículos operativos

Actores involucrados:
Internos
- Sociedades Nacionales en la ruta
- Federación Internacional de la Cruz Roja
- Comité Internacional de la Cruz Roja

Actores externos:
- Dependiendo el contexto se deberá hacer una priorización de los actores clave con los que se podrá trabajar en la asistencia y derivación.
- El programa migración cuenta con un mapeo de actores actualizado.

Es importante mencionar que:
- En caso de requerirse apoyo en la ruta 2, se podrán activar como soporte las Delegaciones de El Palmar, Retalhuleu y Quetzaltenango.
- Si el escenario poblacional incrementa su nivel, se movilizará voluntarios y facilitadores de otras Delegaciones dentro de la ruta migratoria.
- *Es importante indicar que se buscaría la activación de fondos DREF, tras una primera evaluación del plan de acción y el contexto operacional.*

**LÍNEAS DE ATENCIÓN**

Cruz Roja Guatemalteca para garantizar la asistencia humanitaria a la población interes, implementará las siguientes líneas:
Líneas que puede cubrir el programa Migración
- Atención Pre Hospitalaria
- Traslados
- Apoyo Psicosocial
- Restablecimiento del Contacto entre Familiares
- Sistema de referencia y/o derivación
- Kits de higiene (flujos moderados)

Líneas que necesitan presupuesto extra.
- Distribución de Agua Segura
- Meriendas (para migrantes)
- Kits lúdicos para niños
- Kits de apoyo psicosocial
- Medicamentos
- Protector solar y repelente
- Alimentación para voluntarios*
- Hidratación para voluntarios*
- Hospedaje para voluntarios *
- Visibilidad para voluntarios *

**OPERACIÓN LOGÍSTICA**

Con base al análisis de la situación y la planificación de recursos necesarios para brindar cobertura en las rutas identificadas, el Equipo de Primera Respuesta requiere:

- Apoyo e incidencia de Sede Central para la activación de las Delegaciones constituidas en el presente Plan.
- Despliegue y permanencia del personal y voluntarios en las localidades descritas anteriormente y que se encuentran dentro de la ruta de tránsito.
- Autorización para la movilización de las ambulancias necesarias, dependiendo los puestos de atención en las rutas que sean activados) de Sede Central para cubrir la demanda.
- Autorización para la movilización de voluntarios a los lugares de intervención de acuerdo con las necesidades identificadas por el Programa Migración.

**COMUNICACIÓN INSTITUCIONAL**

Dentro de la estructura organizacional de la CRG, las personas autorizadas para brindar información a medios de comunicación son:

<table>
<thead>
<tr>
<th>NIVEL</th>
<th>NOMBRE</th>
<th>CARGO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gobierno</td>
<td>Annabella Folgar</td>
<td>Presidenta Nacional</td>
</tr>
<tr>
<td></td>
<td>Daniel Javiel</td>
<td>Director General</td>
</tr>
<tr>
<td>Operativo</td>
<td>Ma. De los Ángeles Rossell</td>
<td>Coordinadora Departamento Comunicación</td>
</tr>
<tr>
<td></td>
<td>Andrés Gálvez</td>
<td>Director de Programas y D.O.</td>
</tr>
<tr>
<td></td>
<td>Héctor López</td>
<td>Coordinador Programa Migración</td>
</tr>
<tr>
<td>Terreno</td>
<td>DECO</td>
<td>Asistente Comunicación en terreno</td>
</tr>
</tbody>
</table>

* El Programa Migración cuenta con fondos de proyectos que podrían cubrir estas líneas, bajo la autorización de los donantes/cooperantes de dichos proyectos.

* Ver plan de cobertura.
**FLUJO DE COMUNICACIÓN EN TERRENO**

- **Responsables de los puestos de atención humanitaria (14)**
- **Puntos focales de Ruta** (ruta 1 con 1 pf, ruta 3 con 2 puntos focales y ruta 2 con dos punto focales)
- **Coordinador de Programa Migración**
- **Director General**
- **Gobierno**

**REGISTRO Y REPORTES**
Durante todo el operativo, se contará con del departamento de comunicación, quien será responsable del monitoreo y documentación de las acciones humanitarias desarrolladas por la Sociedad Nacional. Además, cada Delegación que interviene en las actividades del presente Plan serán las responsables de suministrar la información de servicios prestados al COE Central, quienes tendrán el acompañamiento y seguimiento de los registros por medio del personal del Programa Migración.

<table>
<thead>
<tr>
<th>Elaborado por:</th>
<th>Revisión y Aprobación</th>
</tr>
</thead>
</table>
| Héctor López - **Coordinador Programa Migración** Katherine Fuentes – **Oficial Regional de Migración para el TNCA de la FICR** | Daniel Javiel  
**Director General CRG** |
## Annex #2 Content of Recreational Kits

<table>
<thead>
<tr>
<th>Product</th>
<th>Details</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sticker wheel</td>
<td>Assortment of stickers including happy faces, stars, animals, etc.</td>
<td>1</td>
</tr>
<tr>
<td>Box of coloured pencils</td>
<td>Small: 12 colours.</td>
<td>1</td>
</tr>
<tr>
<td>Pencil sharpener</td>
<td>Plastic</td>
<td>1</td>
</tr>
<tr>
<td>Balloons</td>
<td>Assorted colours, no logos</td>
<td>6</td>
</tr>
<tr>
<td>Modelling clay</td>
<td>Six 15g-unit box in assorted colours</td>
<td>1</td>
</tr>
<tr>
<td>Small or medium-size toys</td>
<td>Various: soap bubbles, yo-yos, balls, stuffed animals, Legos, puzzles,</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>dinosaurs, others</td>
<td></td>
</tr>
<tr>
<td>Water bottles</td>
<td>Assorted colours, 750 millilitres, with logo</td>
<td>1</td>
</tr>
<tr>
<td>ID bracelets</td>
<td>Rubber or plastic, adjustable, with logo and space to write child’s name and caretaker</td>
<td>2</td>
</tr>
<tr>
<td>Sweets</td>
<td>Lollypops/candy in assorted flavours</td>
<td>2</td>
</tr>
<tr>
<td>Colouring storybooks</td>
<td>10-20 pages, various stories</td>
<td>2</td>
</tr>
<tr>
<td>Drawing pad</td>
<td>Small, stapled, 20 pages</td>
<td>1</td>
</tr>
<tr>
<td>Drawing pencils</td>
<td>HB</td>
<td>1</td>
</tr>
<tr>
<td>Erasers</td>
<td>Pencil</td>
<td>1</td>
</tr>
<tr>
<td>Canvas bag</td>
<td>Sport bag, assorted colours, with logo</td>
<td>1</td>
</tr>
<tr>
<td>Information sheet</td>
<td>Kits’ use and tips for managing stress in children</td>
<td>1</td>
</tr>
</tbody>
</table>

## Annex #3 List of the items contained in the Hygiene kits

<table>
<thead>
<tr>
<th>FOR WOMEN</th>
<th>Amount</th>
<th>FOR MEN</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Roll of toilet paper</td>
<td>1</td>
<td>Roll of toilet paper</td>
<td>1</td>
</tr>
<tr>
<td>Sachet of Palmolive shampoo</td>
<td>1</td>
<td>Sachet of Palmolive shampoo</td>
<td>1</td>
</tr>
<tr>
<td>Soap – 110 gr DK12</td>
<td>1</td>
<td>Soap – 110 gr DK12</td>
<td>1</td>
</tr>
<tr>
<td>Mouthwash - 50ml</td>
<td>1</td>
<td>Mouthwash - 50ml</td>
<td>1</td>
</tr>
<tr>
<td>Toothbrush</td>
<td>1</td>
<td>Toothbrush</td>
<td>1</td>
</tr>
<tr>
<td>Colgate toothpaste - 75 ml</td>
<td>1</td>
<td>Colgate toothpaste - 75 ml</td>
<td>1</td>
</tr>
<tr>
<td>Sanitary napkins – 10 units**</td>
<td>1</td>
<td>3 razors**</td>
<td>1</td>
</tr>
<tr>
<td>Comb</td>
<td>1</td>
<td>Comb</td>
<td>1</td>
</tr>
<tr>
<td>Hand towel</td>
<td>1</td>
<td>Hand towel</td>
<td>1</td>
</tr>
<tr>
<td>Roll-on deodorant</td>
<td>1</td>
<td>Roll-on deodorant</td>
<td>1</td>
</tr>
<tr>
<td>Socks*</td>
<td>2</td>
<td>Socks*</td>
<td>2</td>
</tr>
<tr>
<td>Wet wipes</td>
<td>1</td>
<td>Wet wipes</td>
<td>1</td>
</tr>
</tbody>
</table>