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DREF Final Report

Panama: Hurricane Eta



DREF Operation MDRPA013	
Date of issue: 29 May 2021	Operation start date: 4 November 2020
Operation end date: 28 February 2021 Operation timeframe: 3 months	Operation budget: 149,755 Swiss francs (CHF)
Number of people affected: 7,260	Number of people assisted: 3,500
Host National Society: The Red Cross Society of Panama (RCSP) has 1,345 volunteers and 90 staff and is organized in 23 branches. ¹ The National Society headquarters is in the province of Panama.	
Red Cross Red Crescent Movement partners actively involved in the operation: International Federation of Red Cross and Red Crescent Societies (IFRC), Canadian Red Cross Society, American Red Cross, and the International Committee of the Red Cross (ICRC)	
Other partner organizations actively involved in the operation: Government agencies and ministries: Ministry of Health (MINSAs); Ministry of Housing and Land Use Planning (MIVIOT); Ministry of Public Works (MOP); Ministry of Agricultural Development (MIDA), among others, National Civil Protection System (SINAPROC), community organizations and the United States Southern Command	
The Panamanian Red Cross spent a total of 129,012 CHF. The remaining balance of 20,747 CHF has been reimbursed to the Disaster Relief Emergency Fund.	
<i>The major donors and partners of the Disaster Relief Emergency Fund (DREF) include the Red Cross Societies and governments of Belgium, Britain, Canada, Denmark, German, Ireland, Italy, Japan, Luxembourg, New Zealand, Norway, Republic of Korea, Spain, Sweden and Switzerland, as well as DG ECHO, Blizzard Entertainment, Mondelez International Foundation, Fortive Corporation and other corporate and private donors. The IFRC, on behalf of the PRC, would like to extend thanks to all for their generous contributions.</i>	

<For the final financial report, click [here](#). For contact information, click [here](#).>

A. Situation analysis

Description of the disaster

Tropical storm Eta, which formed in the Atlantic on the night of 31 October 2020, became a hurricane as it passed over the central Caribbean Sea some 835 km northeast of the Panamanian city of Colón (Colón province). Eta made landfall in Nicaragua as a category 4 hurricane on 3 November 2020, and while Eta did not make landfall in Panama, the country experienced heavy rains, floods, and landslides.

¹ [Federation Databank and Reporting System](#)- FDRS, 2018 figures

On 4 November 2020, the National Civil Protection System (SINAPROC) declared a yellow alert² for the province of Chiriquí following reports of several incidents in the Tierras Altas district, specifically in the towns of Cerro Punta, Paso Ancho and Volcán. All emergency response institutions were on alert as a result.

Collateral effects from the rain bands related to the tropical storm were reported in Chiriquí, Bocas del Toro, Comarca Ngäbe Buglé, Veraguas, Coclé, and Panamá Oeste in western Panama. More than 300 mm of accumulated rain was reported in most of the affected areas, and flooding of the Chiriquí Viejo, Fonseca, Jacú, and Tabasará rivers. All rivers in Chiriquí province reached their highest levels, causing severe flooding, landslides, road blockages, collapsed and destroyed roads, fallen trees, and damaging and destroying homes. The floods damaged agricultural lands as well.



Photo: Panamanian Red Cross (PRC) volunteers and staff assisting with clean-up efforts and damage assessment. Source: PRC, 9 November 2020.

The President of the Republic of Panama activated the Emergency Operations Centres (EOCs) to enable all entities

to jointly coordinate the response and assistance necessary to maintain a contingency front. On 7 November, the government declared an emergency in Bocas del Toro, Chiriquí, Coclé, Herrera, and Comarca Ngäbe Buglé³. State sources had reported 19 people dead and 12 missing due to the emergency as of 13 November, as well 918 people rescued and evacuated through the joint task force.

The government set up official collective centres to assist the evacuated population. All people in collective centres were tested for COVID-19, and



those who tested positive were housed in hotels and other places.

The Panamanian government opened 29 temporary collective centres in Chiriquí province, providing shelter to 3,843 people. As of 7 November, the Ministry of Housing and Land Use Planning had reported 999 homes damaged by floods, landslides and collapsed roofs, mostly in Comarca Ngäbe Buglé (597) and Chiriquí (248). Water sources, including water production sites, were also severely affected.

Panama has been experiencing the COVID-19 pandemic since March 2020, with a 14-day cumulative incidence of 234 cases per 100,000 inhabitants⁴ as of 9 November. Lockdown measures have been recently eased, and trade blocs have been re-established to facilitate economic recovery. Face masks are mandatory, and a daily curfew is in place from 11:00 pm to 5:00 am.

As of 18 November 2020, the WASH lines of action in the operational plan included deployment, operation, and maintenance of a water treatment plant. DANA actions included in assessments identified many people with no access to safe water; however, the rivers' high turbidity levels due to continued rainfall at their source made it impossible to put into operation the water treatment plant that was initially contemplated. Furthermore, the communities of Corotú Civil and Majagual do not have access to drinking water. Residents get their water from boreholes, which were flooded and contaminated with coliforms.

Summary of the response

² [SINAPROC declares a yellow alert in Chiriquí province. Ministry of Government](#)

³ [Cabinet declares a state of environmental emergency. Panama Ministry of the Presidency](#)

⁴ [La Prensa Panama. Covid-19 Panamá-MINSA. 10 November 2020.](#)

Overview of Host National Society Response Action

The Panamanian Red Cross (PRC) alerted 23 local committees in ten provinces across the country, activating volunteers with specialized training.

The Panamanian Red Cross is made up of 88 administrative staff and 1,200 active volunteers. Seven volunteer members of the Regional Intervention Team (RIT) and 80 members of the national response teams (Health, Water and Sanitation, General, PSS, Livelihoods and Migration) were activated; 15 volunteer members of the Search and Rescue team were deployed along with a team to identify and register people in affected communities using the Open Data Kit (ODK).

PRC initially deployed one five-volunteer rescue unit from Panama province to provide support, one assessment specialist, two PSS specialists, 11 immediate response team volunteers, one Restoring Family Links (RFL) specialist, and four additional volunteers support RFL activities, and one emergency medical technician. All of them joined in the efforts being carried out by volunteers from the Barú, Boquete, and Tierras Alta's committees assisting with the site.

Between 5 and 11 November 2020, 100 volunteers were maintained in rotation at PRC headquarters in Panama province. It functioned as a centre to collect food for affected people, and 50 volunteers were kept on-site in Chiriquí province to assist with local response. The Panamanian Red Cross responded to its local committees in the Chiriquí area (Barú, Boquete, Bugaba, and David) and its national headquarters and three volunteers and administrative staff tasked with providing strategic coordination, finance, and logistics support.

The National Society's EOC remained active, operational, and fully staffed and track, monitor, and analyse information. Thanks to the strengthening achieved through the Preparedness for Effective Response (PER) process, it had both the area and equipment to do so.

- PRC conducted the following actions as part of its initial response to the event: Delivered first aid assistance to people in collective centres.
- Assisted with search and rescue, first aid, and evacuations.
- Activated the National Society's Emergency Operations Centre.
- Launched a campaign to collect food for affected people.
- Created and launched a fundraising campaign over PRC's social media accounts.
- Coordinated with authorities, including participation in province EOCs.
- Deployed eight vehicles to the field to support actions.
- Distributed humanitarian aid (water, blankets, and biosafety equipment) for people in collective centres.
- Posted reports on the GO platform⁵.

During the emergency, the National Society worked closely with State emergency teams and the Presidency's joint Task Force.

During the first response phase, the Panamanian Red Cross provided humanitarian assistance to affected communities in the form of food aid distributions, PPE to protect against COVID-19 in collective centres and communities, psychosocial support (PSS) kits, jerrycans, water, cleaning kits, hygiene kits, blankets, kitchen kits and shelter tool kits, assisting more than 600 families.

Several actions included a community awareness component aimed at children and older adults, disseminating health and hygiene promotion messages via recreational activities involving social dynamization. PSS and RFL interventions were carried out in collective centres and communities and cleaned of wells, and child- and teen-friendly spaces were created in communities.

Given these scenarios, PRC consulted the disaster management coordinator assigned by IFRC at the beginning of the emergency regarding the feasibility of revising the line of action in the explanatory/narrative part while maintaining the same allocated budget for the items necessary to assist the beneficiary communities.

⁵ [IFRC GO platform – Panama. Hurricane ETA Emergency Report](#)

PRC is currently implementing two additional emergency operations:

- IFRC Emergency Appeal for the Americas: COVID-19 ([MDRCOVID-19](#)), aligned with the IFRC worldwide Emergency Appeal
- IFRC Emergency Appeal for the Americas: Population Movement ([MDR42004](#)), with actions in Darién province.

Overview of Red Cross Red Crescent Movement Actions

The IFRC Americas Regional Office (ARO) and the Regional Logistics Unit (RLU) are both located in Panama. The PRC coordinated its actions with ARO's Disaster and Crises Prevention, Response and Recovery (DCPRR) unit, which provided technical support and coordination for this emergency response. IFRC's RLU provided logistical support to the PRC collection centre through logistics equipment and human resources trained in warehouse management.

The International Committee of the Red Cross (ICRC) is also present in the country, providing technical advice on the Safer Access Framework and Restoring Family Links (RFL) as well as on issues related to humanitarian diplomacy and advocacy as part of the National Society's interaction with the country's authorities. American Red Cross and Canadian Red Cross are also present in Panama through their regional delegations, and both National Societies are in contact with PRC.

Overview of non-RCRC actors' actions

The Government of Panama launched "Operación Patria", a three-phase operation to respond to the emergency. Led by the Ministry of Public Security, the first phase focused on response, i.e., restoration of basic services, first aid, damage assessment, the opening of collective centres, and provision of humanitarian aid⁶.

The Government launched the Panama Solidario Plan, with a budget of 72 million dollars to procure the food aid delivered to affected families. The government also launched a donation campaign to enable the population to provide humanitarian aid. As of November 7, 1,700 tonnes of aid had been sent to affected areas.

As part of the actions, the National Air and Naval Service (SENAN) provided operational support through sea and air logistics to reach secluded areas. The Government arranged for the use of two cargo planes with the Colombian Air Force to establish an airlift between the district of David and Bocas del Toro province. In addition, Panama's Civil Aviation Authority arranged for two planes from David to Changuinola, establishing a communication line over the sea from Colón to Bocas del Toro with two SENAN barges. The United States Southern Command's Task Force Bravo also helped the Panamanian government provide air support to affected areas.

Other actions by the State include⁷:

- SINAPROC focused its actions on establishing a national EOC, which was essential for coordinated efforts such as this one. SINAPROC also participated in search and rescue actions in affected areas.
- The Ministry of Health (MINSAs) strengthened its network, sending staff to collective centres to perform rapid swab tests and promote the use of face masks, maintaining family 'bubbles' and frequent handwashing. MINSAs maintained security protocols in communities, and collective centres with identified cases.
- The Ministry of Public Works worked on repairing roads that had collapsed and were damaged by floods and landslides, particularly highways in mountainous areas in Bajo and Alto Boquete, Llanos de Gualaca and Cerrón de Renacimiento in Chiriquí province.
- IDAAN stabilized the system and restored operations at the Chiriquí water treatment plants that supply drinking water to the area.

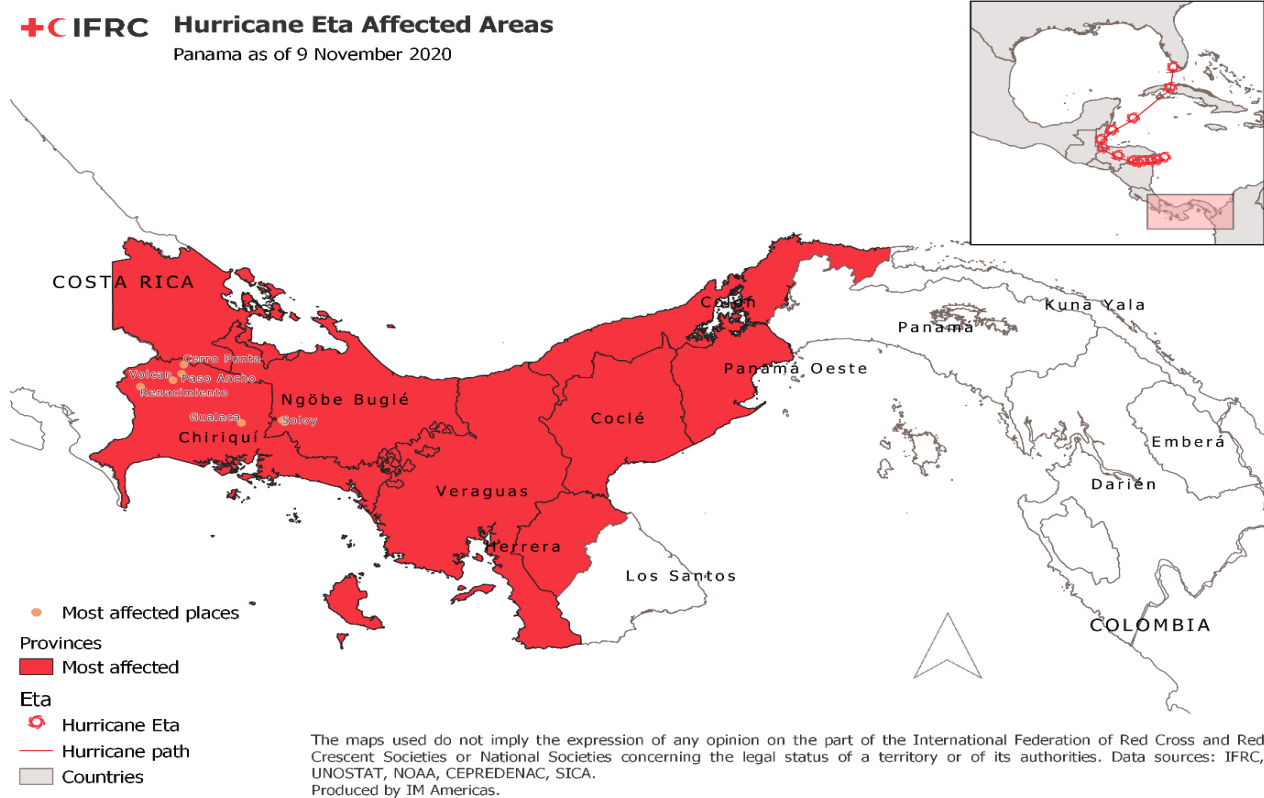
⁶ [Operación Patria – Government of Panama. Ministry of Public Security](#)

⁷ [Management of Operación Patria – Government of the Republic of Panama](#)

- The Ministry of Education, in coordination with municipal authorities, assisted with the opening of 16 collective centres in Barú, Boquete, Besikó (Comarca Ngöbe Buglé), Gualaca, Tierras Altas, and Bugaba. It also collaborated with 72 Regional Directorate of Education units (teaching and administrative).

Needs analysis and scenario planning

Needs analysis



According to the "Operación Patria" report⁸, as of November 8, the indirect damages caused by Hurricane Eta included 20 floods and 23 landslides.

Health

Seventeen dead and 62 missing people were reported. The joint task force led search and rescue operations in affected areas.

Immediate first aid was provided to the people evacuated by PRC, and first aid was provided to people who required it and those in collective centres.

Given the large number of people housed in collective centres, PRC implemented measures to provide them with information and PPE to reduce the risks of contracting COVID-19. PPE was distributed, hygiene promotion was carried out, and messages were disseminated to complement the COVID-19 testing campaign conducted by the Ministry of Health.

It must be acknowledged that, among other issues, diseases increased, water sources were contaminated, and floods caused latrines to overflow.

The population required psychosocial support because of the floods' adverse effects on their mental health. PSS kits were delivered to children and adults.

⁸ [Panama America, 8 November 2020](#)

 **Shelter**

Initial assessments indicated that 999 houses were damaged by floods, landslides, and high winds. By 13 November, SINAPROC reported 3,843 people housed in 29 collective centres in Chiriquí and Veraguas provinces⁹. Houses were also damaged in the districts of Barú, Tierras Altas, Gualaca, Alanje and Bugaba, Comarca Ngäbe Buglé and Bocas del Toro.

Although the government distributed mattresses, the affected population needed other types of support, such as non-food items (blankets, personal hygiene items, among others), to meet their basic needs. Blankets were initially distributed both to people in collective centres and to those who remained in their homes.

Shelter tool kits and kitchen kits were distributed after assistance for home cleaning and repair efforts were identified as a priority. The people housed in collective centres could return quickly to their homes.

**Water, Sanitation and Hygiene Promotion**

Wastewater treatment and drinking water production were seriously affected in several areas. Drinking water distribution was interrupted in some communities due to ruptured pipes, and the Chiriquí IDAAN reported that the water production system had been seriously affected by heavy rains. Several water treatment plants also stopped functioning because of the event, and water treatment was suspended in David, San Félix, Tolé, Divalá, Santa Marta, Dolega, Paso Canoas, and San Bartolo. Clean water and hygiene were required in targeted areas to mitigate water-borne diseases and meet the basic needs of the area's population.

As of 18 November 2020, the WASH lines of action in the operational plan included deployment, operation, and water treatment plant maintenance. DANA actions included in assessments identified many people with no access to safe water; however, the rivers' high turbidity levels due to continuing rains at their source made it impossible to put into operation the water treatment plant initially contemplated. Furthermore, the community of Corotú Civil and Majagual does not have access to drinking water. Residents get their water from wells, which were flooded and contaminated with coliforms.

The National Society met with the IDAAN to find viable options for response in this regard and work collaboratively in focusing actions on the three most affected communities through the following activities:

- Community of Paso Ancho in Tierras Altas
 - IDAAN provided a 10,000-gallon water truck to be used as a safe water repository, refilled daily.
 - Panamanian Red Cross mobilized the water truck to the site and organized the water distribution station in the community. The necessary hardware and pipes were purchased and installed.
- Community of Corotú Civil in Barú
 - Panamanian Red Cross purchased and installed three 1,080-gallon tanks in the community, set up a detachable station (low bed), and built the necessary distribution system.
 - IDAAN refills the tanks every three days.
- Community of Majagual and Corotú Civil in Barú
 - The communities use wells, as there are no aqueducts.
 - The wells were drained using submersible pumps, conducting previous chlorination and drainage of the water, and ensuring it was safe for human consumption.

Water purifiers, as well as instructions on their use were provided to Majagual and Corotú Civil, which are communities that get their water from wells. Jerrycans were distributed in Paso Ancho, Corotú Civil and Majagual to enable people to secure and safely store water at home. As providing support to cleaning tasks was deemed a priority, PRC distributed cleaning kits and hygiene kits.

**Livelihoods**

Panama is currently experiencing the financial effects of the COVID-19 outbreak. Agriculture and livestock production are the primary sources of livelihoods in Chiriquí and Veraguas provinces affected by the heavy

⁹ SINAPROC. 9 November 2020.

rains and floods. Many families who engaged in subsistence agriculture and livestock production were unable to recover their livelihoods.

The Red Cross Society of Panama collected food items to prepare food kits to be distributed to the affected population to ensure daily needs of 2100 Kcal for a one month.



Protection, Gender and Inclusion (PGI)

While all people are affected by crises, women and vulnerable groups face differentiated impacts in emergencies. This happens as well in Panama. Women are the first to respond as paid or unpaid domestic workers, health professionals, civil society volunteers, community volunteers, and paid or unpaid caregivers. Under normal social conditions, several studies show the gender gap between men and women in Panama. Its gender inequality index of 0.58 at the country level and of 0.87 in indigenous areas (average of 0.73) makes Panama a highly gender-unequal country. Before the COVID-19 pandemic, approximately one in five people in Panama was living in multidimensional poverty; however, the incidence of multidimensional poverty is extremely high among the indigenous population: 93.7 per cent of Guna women, 89.8 per cent of Ngäbe Buglé women, and 70.9 per cent of Embera women live in multidimensional poverty. This affects one-third of children and adolescents as well, as 5.6 per cent (24,998), 24.9 per cent (112,857), and 1.4 percent (6,313) of children and adolescents in indigenous regions live in multidimensional poverty. The 2018 women poverty index shows that the 'feminization' of poverty is real - 123.2 at the national level, 133.3 in urban areas, and 122.5 in rural areas.

The above implies the need for adequate care plans for indigenous peoples and vulnerable groups in the context of the health crisis, in emergencies, and subsequent socioeconomic recovery.¹⁰

The Panamanian Red Cross supported creating child- and adolescent-friendly spaces in the communities, providing them with healthy activities. PRC's volunteer base is highly diverse, which enabled it to have person-to-person access to indigenous peoples because many volunteers speak the language.



Targeting

Panamanian Red Cross implemented its emergency plan of action in Chiriquí province, providing humanitarian assistance to more than 600 families (more than 3,000 people) affected by rains and landslides.

- District of Barú (Chiriquí province): Majagual, San Pedro, Baco, La Esperanza, Corotú Civil, San Valentín.
- Districts of Tierras Altas and Renacimiento (Chiriquí province): communities of Cerro Punta, Bambito, Renacimiento, Paso Ancho, Cantares, Teca, Rio Sereno.

B. Operational strategy

Proposed strategy

The National Society conducted continuous assessments and analyses of the affected communities' needs, contributing to the national response to the floods and landslides that affected Chiriquí province. The initial target was to assist 600 families; however, many affected families were detected, ultimately providing health, food aid, water and sanitation, hygiene, shelter and protection, gender, and inclusion assistance to 1,098 families.

To increase its capacity to implement the DREF, the Panamanian Red Cross hired three people:

- 1 DREF operation coordinator
- 1 finance officer
- 1 field officer

The activities were implemented through the deployment of the National Society's trained volunteers:

¹⁰ UN Women. Panama: Preliminary analysis of the impact of the COVID-19 pandemic on women. Diagnostic and recommendations for economic and social reactivation. June 2020.

- 100 volunteers (Barú, Boquete, David, Tierras Altas, Bugaba and Panama).
- Team of PSS specialists
- Team of search and rescue specialists
- Team of NIT specialists
- CBHFA and livelihoods specialists
- Communications department staff
- NIT WASH specialists

All volunteers were provided with the necessary visibility and protection equipment, including COVID-19-specific PPE, to perform their actions in the field.

Coordination was maintained with the National Operations Centre established by the Panamanian government to prevent duplication of efforts, jointly identifying the communities and their needs. This coordination included local governments. PRC shared information from communities in which censuses and assessments had been performed since State teams had not yet reached many of these communities, thus promoting early recovery (rehabilitation of roads and access roads - Ministry of Works Public; implementation of aqueduct infrastructure - IDAAN).

The initial assessment considered the level of impact to families and communities, prioritizing the needs of families and their members, especially of single-parent families, older adults, and heads of households. Beneficiaries and target communities were continuously assessed throughout the DREF's implementation to be able to adjust the intervention to assist key populations.

The assessment processes included consultations with local authorities to verify the levels of impact and community leaders and other community members, establishing communication mechanisms that have helped strengthen community organizing and communication mechanisms between local authorities and communities.

People's engagement through continuous dialogue was significant, as their input contributed to achieving effective and efficient interventions. The continuous dialogue helped to ensure respect for the community culture and contributed significantly to achieving behavioral changes at the community level.

Engagement with key stakeholders helped to maximize the contributions and knowledge that the community provided, which facilitated the recovery processes. It is worth mentioning that the community participated fully and worked jointly to create friendly spaces.

Specific needs were addressed based on the vulnerabilities identified in the initial assessment and throughout the process, facilitating people's access to the assistance provided by the National Society.

At the community level, continuous dialogue between key stakeholders within the National Society; field visits by government and management bodies to validate the actions conducted and getting involved in transparency and accountability processes; and the continuous communication between local committees, field teams, and national headquarters have allowed PRC to improve transparency and accountability.

Internally, the National Society uses the KOBO technological tool to manage information during beneficiary selection and aid distribution processes. In terms of sharing information with other partners, no information was shared with other actors because of data protection concerns. PRC has handled data about the number of affected communities and families at the State actor level.

C. Detailed Operational Plan



Shelter

People reached: 4,600¹¹

Male: 2,531

Female: 2,069

Outcome 1: Communities in disaster and crisis affected areas restore and strengthen their safety, well-being and longer-term recovery through shelter and settlement solutions.

Indicator	Target	Actual
# of families provided with emergency shelter items, materials and/or tools to have a space that meet the minimum living conditions.	300	300

Output 1.1: Shelter and settlements and basic household items assistance is provided to the affected families.

Indicator	Target	Actual
# families provided with household items (at least one item)	300	800

Narrative description of achievements

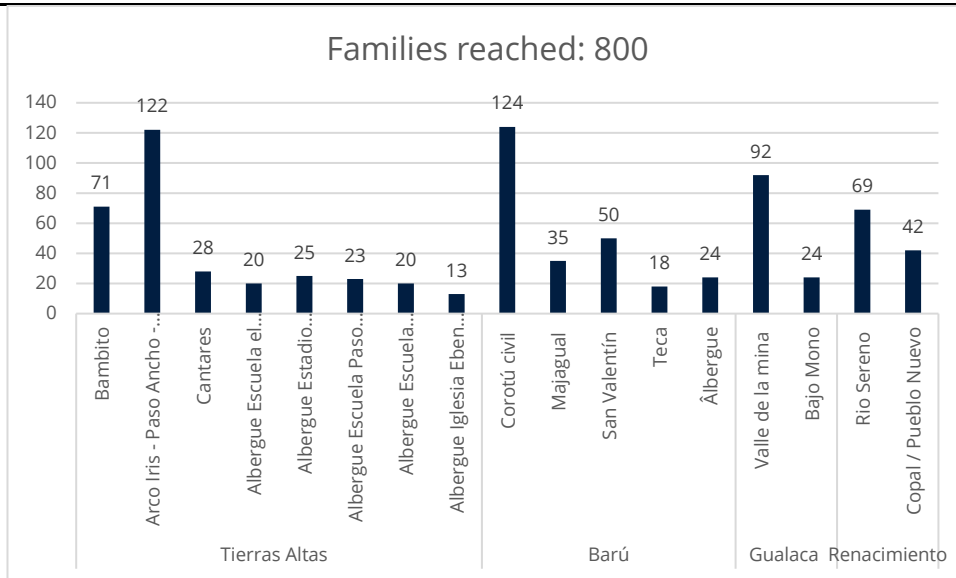
Assessment of affected areas and selection of target population based on established vulnerability criteria.

Assessments initially identified **600** families. Panamanian Red Cross established the following criteria to select and prioritize the affected population:

- Communities with a high number of affected homes.
- Households with low socioeconomic status.
- Homes whose provision of basic services was interrupted.
- Families most affected by flooding, including the people whose homes suffered the most damage and were currently in collective centres in Chiriquí province.
- The most vulnerable population groups in Chiriquí province, including single-parent families, older adults, women who are pregnant, children less than five years of age, people with disabilities and indigenous people.
- Households that have not received humanitarian aid from the State and other actors.

Selection criteria were always applied during assessment, selection, and registration processes.

¹¹ The number of people reached refers to the 800 families benefitted through various actions, including distribution of blankets in collective centres. There is no disaggregated information available by number of people in the collective centers, but only in communities (3,600 people).



PRC coordinated with local authorities and community leaders.

Acquisition and distribution of 300 kitchen kits

300 kitchen kits were distributed to assessed families with this need who lost their belongings due to water and mud in their homes because of the floods.

PRC monitored for correct use of distributed items in the communities, maintaining communication with and getting feedback from families.



Photo: Panamanian Red Cross volunteers during kitchen kit distribution in Valle de la Mina.
Source: Panamanian Red Cross

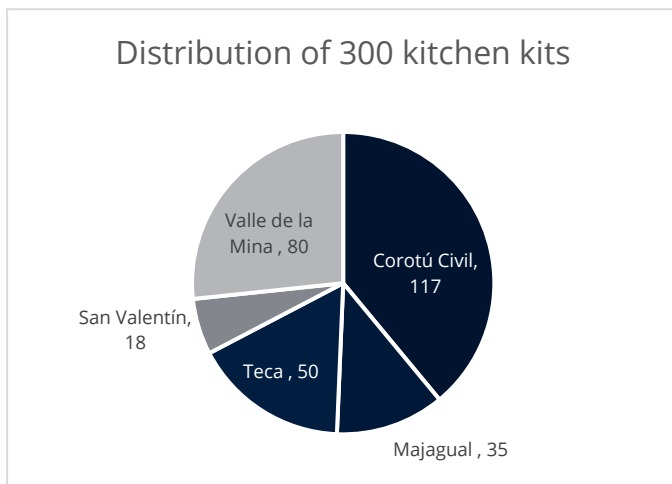
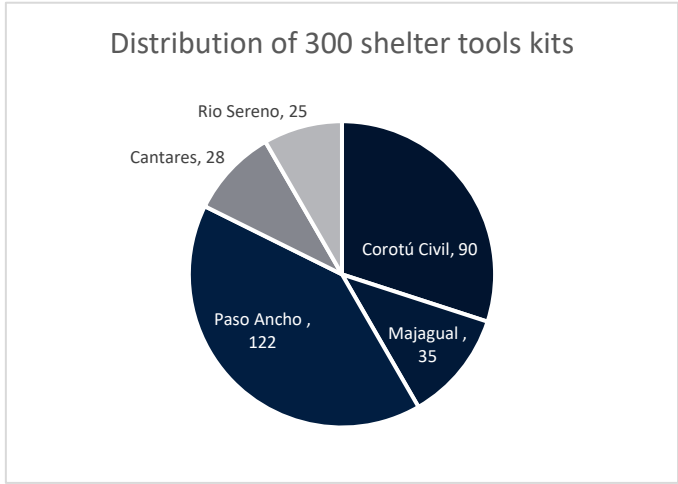




Photo: Panamanian Red Cross volunteer explains the content and use of the Shelter Tool Kit to a beneficiary in Corotú Civil. Source: Panamanian Red Cross

Acquisition and distribution of 300 shelter tools kits.

These kits were provided to enable families to begin repairing their homes, as they had to make these repairs using their resources, and many had lost all their belongings. People were instructed on techniques for using the kits so they could make repairs safely.

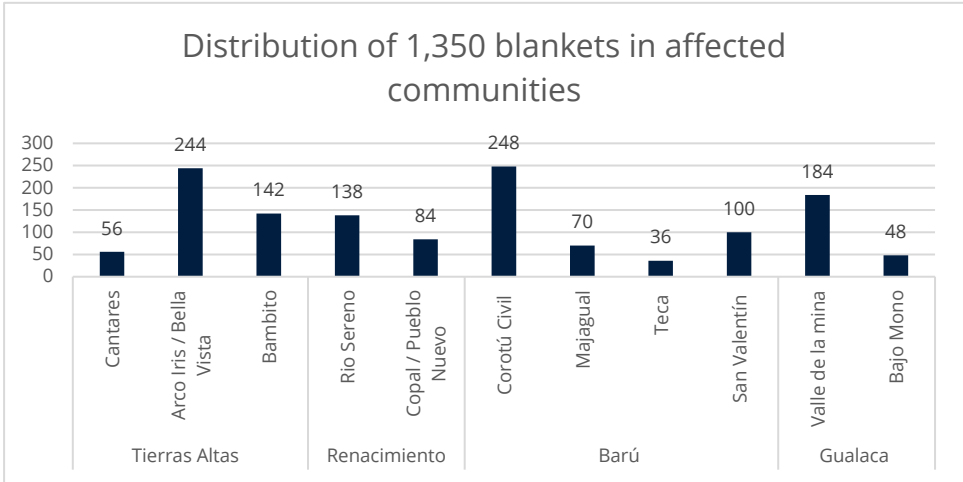


Acquisition and distribution of 600 blankets (2 per family).

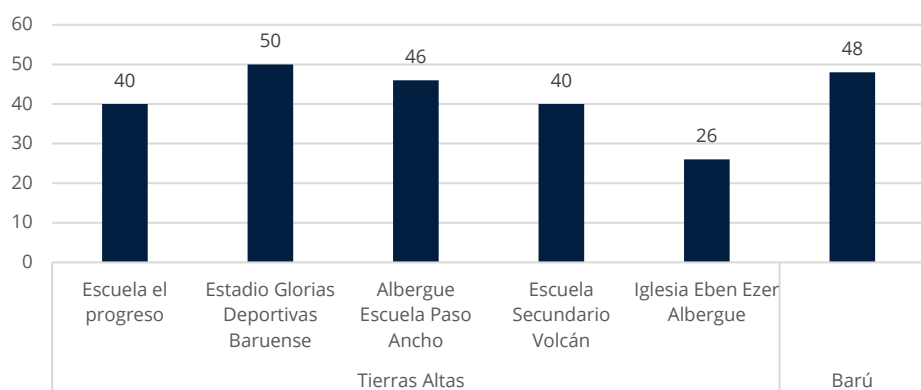
Blankets were initially distributed only to families living in collective government centres; however, additional donations from citizens and businesses increased the number of available blankets (1,600). This made it possible to reach more families at the community level (**800 families**), as not all affected families could be placed in collective centres despite their many needs.



Photo: Panamanian Red Cross volunteers and staff distribute blankets in Bajo Mono. Source: Panamanian Red Cross



Distribution of 250 blankets in collective centers



Challenges

- Long distances to communities with some cut off by landslides. While PRC does have local committees near the affected areas travel to the communities could take up to three hours, reducing the time used to conduct the intervention to one hour a day.

Lessons learned

- It is necessary to have specialists in all local committees to be able to conduct immediate interventions.
- Local committees need to maintain permanent, strategic communication with other State levels and/or institutions and local governments. This will facilitate humanitarian aid provision because it allows all efforts to be undertaken jointly from the beginning of the operation.



Livelihoods and basic needs

People reached: 4,485¹²

Male: 2,287

Female: 2,198

Outcome 2: Communities, especially in disaster and crisis affected areas, restore, and strengthen their livelihoods.

Indicator:	Target	Actual
# of targeted households that have enough food, to meet their survival threshold	300 families	900 families

Output 2.2: Basic needs assistance for livelihoods security including food is provided to the most affected communities

Indicator:	Target	Actual
# of families that receive a food parcel for 1 month	300	900
# of families that receive livelihood guidance	300	900

Narrative description of achievements

Procurement and distribution of food packages to the affected population that met the needs for one month.

¹² The number of people reached refers to the 900 families benefitted with the distribution of food kits. There is no disaggregated information available by number of people, only number of families.

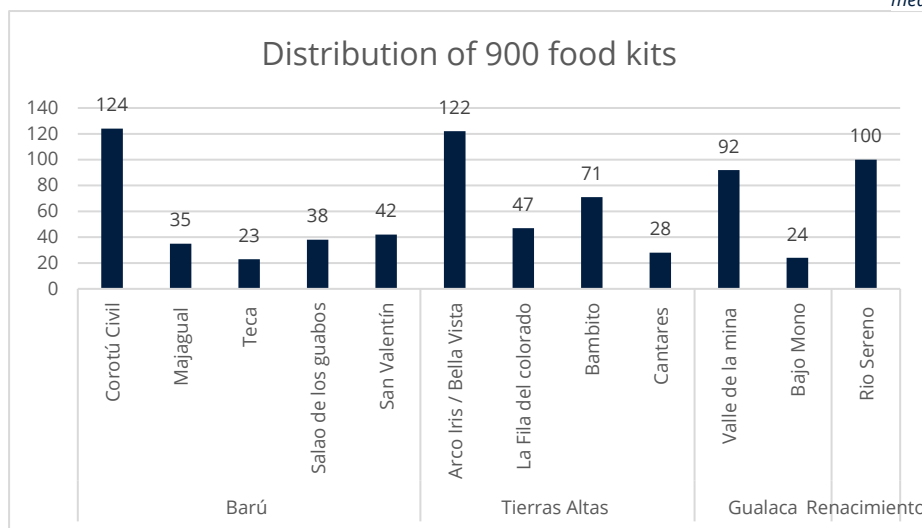
Livelihoods and basic needs assessments were performed in affected communities.

Many non-perishable food items were donated by Panamanian citizens and businesses eager to assist the communities affected by the indirect effects of Eta and Iota. These were received at the collection centre that the PRC opened for seven days at their administrative offices and local committees. The items received were classified, packaged, and supplemented to meet Sphere Manual standards.

Food packages, sufficient to meet needs for one month, were distributed to 900 families over different visits, and families were sensitized regarding livelihoods.



Distribution of food aid packages in the community of Copal, ensuring physical distancing and biosecurity measures. Source: Panamanian Red Cross



Challenges

- Long distances to communities with some cut off by landslides. While PRC does have local committees near the affected areas travel to the communities could take up to three hours, reducing the time used to conduct the intervention to one hour a day.
- Based on what affected communities expressed during livelihoods and basic needs assessments, PRC identified that many had lost means of livelihoods such as poultry, home gardens, plantain plantations, and the crops they grew to sell. This was an item that the community needed, but that was removed from the DREF, but PRC managed to make up for it with contributions from other donors.

Lessons learned

- Food aid must be assembled in boxes, which makes it easier to handle during travel and distribution and reduces the risk of spoilage.
- Coordination with other actors is extremely important because strategic alliances are created, and aid can reach communities faster.



Health

People reached: 3,500¹³

Male: 1,925

Female: 1,575

Outcome 3: The immediate risks to the health of the affected populations are reduced through improved access to medical treatment.

Indicators:	Target	Actual
# of people reached by National Society with services to reduce relevant health risk factors	3,000	3,500 ¹⁴

Output 3.1: Improved access to health care and emergency health care for the targeted population and communities.

Indicators:	Target	Actual
# of volunteers deployed to support search and rescue	10	15
# of families provided with first aid services in collective centres	300	250 people
# of health promotion campaigns/CBHFA sessions are conducted	5	10
# of families that receive COVID-19 PPE kits	300	650 families

Outcome 4: The psychosocial impacts of the emergency are lessened

Indicators:	Target	Actual
# of people reached by psychosocial support	1,500 people	2,287 people

Output 4.1: Psychosocial support provided to the target population as well as to RCRC volunteers and staff

Indicators:	Target	Actual
# of families provided with PSS support	300	650
# of PSS kits are procured and distributed to the targeted population	300	570

Narrative description of achievements

Provision of evacuation, search, and rescue services during the initial phase of the emergency.

Provision of first aid services in affected areas and collective centres.

PRC coordinated with MINSA on health matters in affected areas. One of the main requests was for Psychosocial Support assistance for people in collective centres and communities.

At the beginning of the emergency, PRC volunteers from local committees in Barú, Boquete, Tierras Altas began evacuating residents as soon as the collateral effects from Eta started to be felt in Panama and rescuing people who were left cut off. PRC's search and rescue unit then began its search and rescue efforts, including search and recovery of bodies. All this was coordinated through the Joint Task Force and Panama's National Operations Centre.

All people who received evacuation and search and rescue assistance immediately received first aid care.

Health promotion campaigns in affected areas, including CBHFA.

Two health promotion sessions were held in each community, including prevention of accidents in the home, haemorrhage control, and attention to fractures, in addition to the COVID-19 prevention campaign where PPE kits were distributed.

Acquisition and distribution of family COVID-19 PPE kits to affected households

¹³ The number of people reached refers to the 250 people that received first aid services through the evacuation, search and rescue activities, plus the 650 families benefitted with different activities such as PPE and PSS.

¹⁴ The total has been calculated by the 650 affected families with five members per family plus 250 extra persons reached with psychosocial support services when evacuated and/or rescued.

The people housed in collective centres received COVID-19 prevention and control measures through promotional campaigns, as well as family COVID-19 PPE kits including one 24-oz bottle of alcohol, one bottle of gel with alcohol, one spray bottle with alcohol, five face shields and one box of 50 face masks.

Provide PSS to people affected by the disaster and acquisition and distribution of PSS kits for adults and children in collective centres.

PSS needs were assessed and identified in affected areas, assisting in groups and families, children and adolescents in collective centres and communities.

In all the communities where distributions were made to the **650** beneficiary families, boys and girls



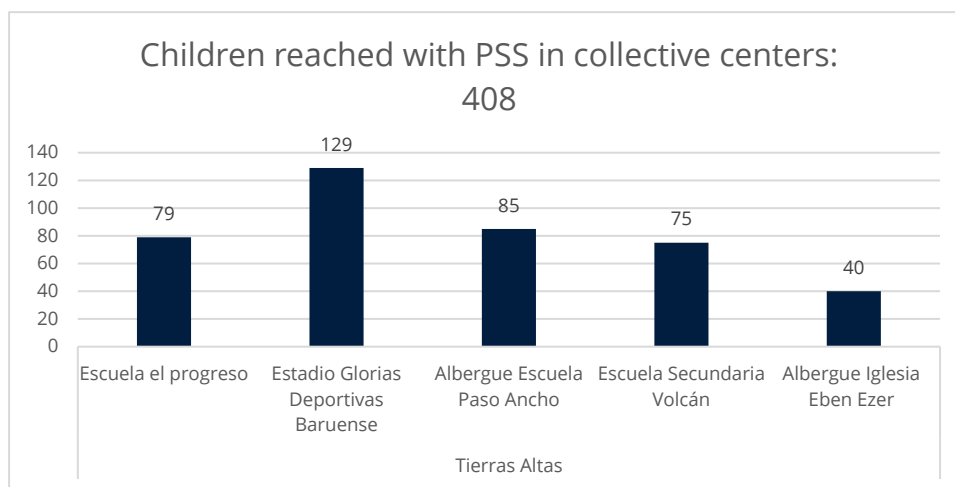
Photo: PRC volunteer during a PSS intervention with children in communities affected by the emergency. Daniels the puppet helps with the educational process. Source: Panamanian Red Cross

participated in recreational and educational activities led by volunteers specializing in PSS and social dynamization.

Activities included games, nursery rhyme dances, balloon twisting, painting, hygiene promotion, drawing, and working on the PSS book called Learning Emotions.

These activities provided a pleasant space for children who came with their parents to humanitarian assistance events held during humanitarian aid distributions and PSS activities for adults and hygiene promotion.

Children received a PSS kit, the Learning Emotions book, as well as cookies and juice. These PSS and dynamization activities were also held for the children housed in collective centres, reaching **408** boys and girls. Participants received new toys donated by the community, cookies, juice, and others.



Actions were followed up during every visit to communities.

The PSS team worked on deactivation with 65 volunteers (20 female and 35 male), an intervention aimed at volunteers' self-care that allows them to share their experiences and minimize the stress these could potentially cause.

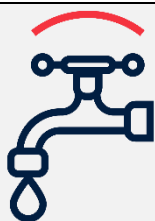
Challenges

- At the beginning of the emergency, there were no PSS didactic resources to work with children in collective centres. Red Cross Youth volunteers organized a campaign to collect donations for children affected by Eta, managing to procure soft drinks, cookies, new toys, etc.

- Implementing activities during a pandemic, which hindered community awareness-raising that was carried out house to house.
- The community approach on the proper use of face masks. People showed up for humanitarian aid distributions with no face masks. They were sensitized in this regard and provided face masks.
- The quarantine established by the government hindered access to the communities for a limited time.

Lessons learned

- A PSS toolbox must be pre-positioned to be able to have tools available from the beginning of the interventions.
- The PSS team is one of the teams that need to be on the ground from day one to assist both the communities and the volunteers in the field.



Water, sanitation and hygiene

People reached: 3,560

Male: 1,816

Female: 1,744

Outcome 5: Immediate reduction in risk of waterborne and water related diseases in targeted communities.

Indicators:	Target	Actual
# of people improve their access to safe water and hygiene	1,500	3,560

Output 5.1: Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population

Indicators:	Target	Actual
# of people provided with safe water (according to WHO standards)	1,500	3,560
# of families reached with jerry cans	300	300

Output 5.2: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population.

Indicators:	Target	Actual
# of families who receive a hygiene kit	300	300
# of families who receive a cleaning kit	300	300

Narrative description of achievements

Community	Families	Number of people
Bambito	71	337
Arco Iris - Paso Ancho	122	955
Bella Vista - Paso Ancho		
Cantares	28	191
Cerro Punta	3	12
Corotú civil	124	619
Majagual	35	257
San Valentín	50	251
Teca	18	100
Valle de la mina	80	575
Rio Sereno	69	303
TOTAL	600	3,560

Water distribution and installation of a 10,000-gallon tanker (45,460.9 litres) in Paso Ancho.



Photo: Installation of a tanker in Tierras Altas to distribute safe water for human consumption. Source: Panamanian Red Cross

The affected population lacked drinking water due to the shortage of drinking water production and the rupture of the pipes connected to the main pipelines in Tierras Altas. PRC addressed this need through water tanks, as the rivers' turbidity levels made water purification impossible.

In a meeting held with IDAAN and the Rural Cleanliness and Aqueduct Board, they agreed to supply water to the community of Paso Ancho in Tierras Altas. The IDAAN supplied the water truck; the Board refilled the water truck daily; and PRC mobilized the tanker to the site, built safe water points - maintaining two metres between each due to COVID-19 issues - and monitored, followed up, and delivered talks on proper water use.

The initial number of identified beneficiaries were 122 families, but some 2,000 families lived near the area where the water truck was set up, many of whom also benefitted from water provision. During the first two weeks, the Board refilled the water truck twice a day, reaching 1,150 families per day. The water truck remained on-site from 19 December 2020 to 19 January 2021, which provided a quick response to families in Paso Ancho while the IDAAN completed repairs in the area. A total of 320,000 gallons were distributed in 16 days and 160,000 gallons in 16 days, for 480,000 gallons of water distributed in 32 days.

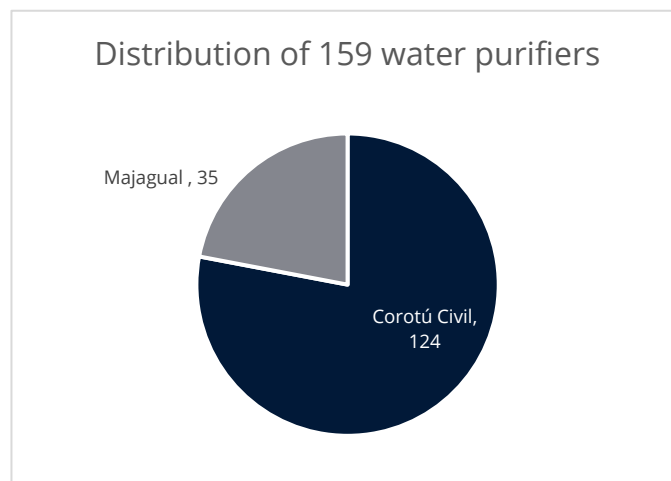
Well cleaning in Majagual and Corotú Civil.

The communities of Corotú Civil and Majagual have no access to drinking water, as they get their water from wells. These wells were flooded with river water and contaminated with coliforms. The Panamanian Red Cross provided two 1,080-gallon tanks to provide a quick solution. These tanks provided water from 26 December 2020 to 28 February 2021 to 124 families. The tanks were refilled by IDAAN every three days - a total of 47,520 gallons were distributed.

121 wells in Corotú Civil and three community wells in Majagual were drained and cleaned.

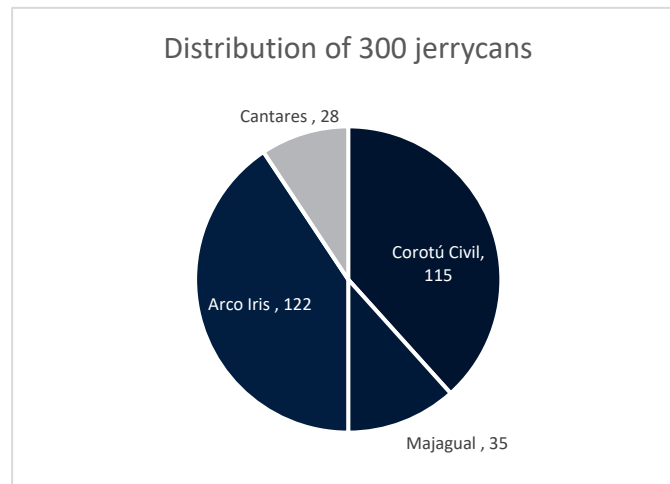
- PRC first tested the water using a Bacteria Test Kit, finding the presence of coliforms in wells.
- All wells were filled with muddy, cloudy water. PRC applied chlorine granules to wells and waited 24 hours.
- Submersible pumps were then used to extract as much water as possible.
- Chlorine tablet dispensers were provided to continue chlorinating the water.
- PRC has monitored, through sampling, that the correct amount of chlorine is being used and continued to test for bacteria, finding that the water no longer has coliforms and is safe for human consumption.

Delivery of PURE water treatment sachets (donated by P&G) for use in community wells in Majagual and Corotú Civil together with well cleaning so that people could have access to safe water.



Distribution of jerrycans (600 units, two per family).

Two jerrycans were provided to each family to secure water in distribution centres and store it safely at home. Key messages on the importance and proper use of water were provided during this distribution.



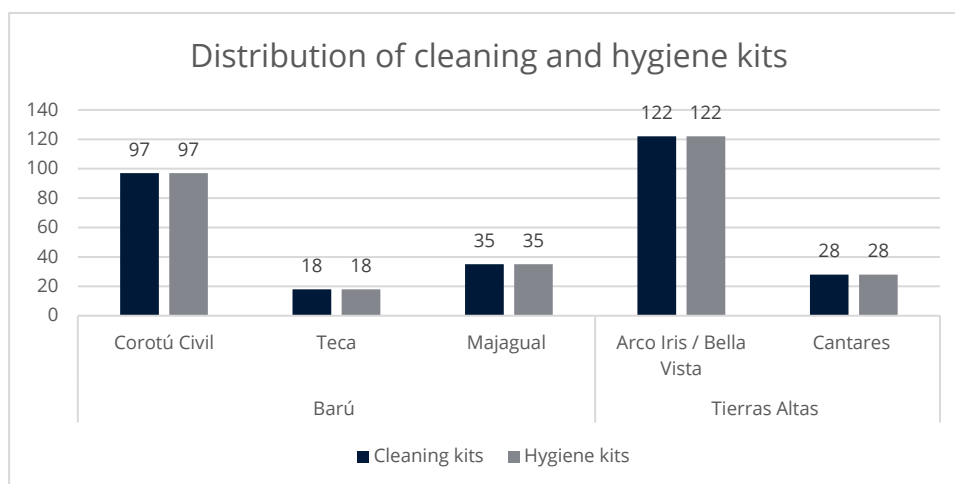
Refresher training workshop on water and basic sanitation and hygiene promotion for volunteers.

Before cleaning the wells, volunteers were provided the water and basic sanitation and hygiene promotion workshop, which was attended by volunteers from Chiriquí province and included the National Civil Protection System and the National Border Service.

Committees	Volunteers
Puerto Armuelles	6
Bugaba	4
Boquete	4
David	4
National Civil Protection System	2
National Border Service	1
Total	21

Hygiene kits & cleaning kits - Acquisition and distribution (one per family) (300 kits). Awareness campaigns on waste management, recycling, and prevention of mosquito breeding sites. Cleaning and hygiene promotion campaigns in communities.

PRC distributed 300 cleaning kits and 300 hygiene kits, as shown in the graphic below:



Hygiene promotion campaigns were delivered to 600 families in flood-affected communities to reduce the risk of vector-borne diseases. Community cleaning campaigns were also carried out to collect and properly dispose of waste.



Photo: PRC volunteers and staff distribute cleaning and hygiene kits to beneficiaries in Cantares. Source: Panamanian Red Cross

Challenges

- The changes in operational strategies that had to be adapted in the plan of action led to changes in the budget lines and the lack of personnel trained in water and sanitation management, which led to a safe water management training process for the community.
- Behavioural changes in the community regarding waste and wastewater management as components that pollute groundwater sources, consultative processes on their water sources (wells) for drainage and placement of chlorinators.

Lessons learned

- All committees must have personnel trained in water and sanitation matters.
- Water and sanitation equipment must be kept in a safe and accessible location and the rest of the specialized equipment that the National Society keeps having immediate access to in the event of a disaster.



Protection, Gender and Inclusion

People reached: 1,938

Male: 950

Female: 988

Outcome 6: Communities become more peaceful, safe and inclusive through meeting the needs and rights of the most vulnerable

Output 6.1: Programmes and operations ensure safe and equitable provision of basic services, considering different needs based on gender and other diversity factors.

Indicators:	Target	Actual
# of staff and volunteers informed of child protection standards	35	100

Output 6.2: Programmes and operations prevent and respond to sexual- and gender-based violence and other forms of violence especially against children.

Indicators:	Target	Actual
# of child-friendly spaces created	30	24

Narrative description of achievements

Ensure that staff and volunteers have signed and been briefed on the Code of Conduct and Child Protection.

All volunteers and staff involved in actions in communities to support families affected by the collateral effects of Eta attended briefings during which they were provided with and signed a copy of the Code of Conduct.

Establish adequate spaces for children and community child protection activities.

Friendly spaces ensure that people from affected communities are able to enjoy the benefits of living in society, promoting the integration and inclusion of community residents, reducing spaces of violence and discrimination.

In collective centres, children did not have spaces in which to interact or coexist. Activities were carried out in this regard, creating a safe space for interaction, dialogue, and fun. A total of **338** children were reached. These activities also involved parents.

A total of 24 child-friendly spaces were created by different actions such as the restoration of 3 playgrounds for boys and girls / soccer field conditioning, activities in 4 collection centers and 17 activities carried out in the communities: Arco Iris 2, Bella Vista 2, Cantares 2, Majagual 3, Copal 1, Corotú Civil 3, Cañas Gordas 1, Bajo Mono 1, El Valle de Hornito 1, Pueblo Nuevo 1.



Photo: Friendly spaces at the collective centre at Escuela Básica de Volcán. Source: Panamanian Red Cross

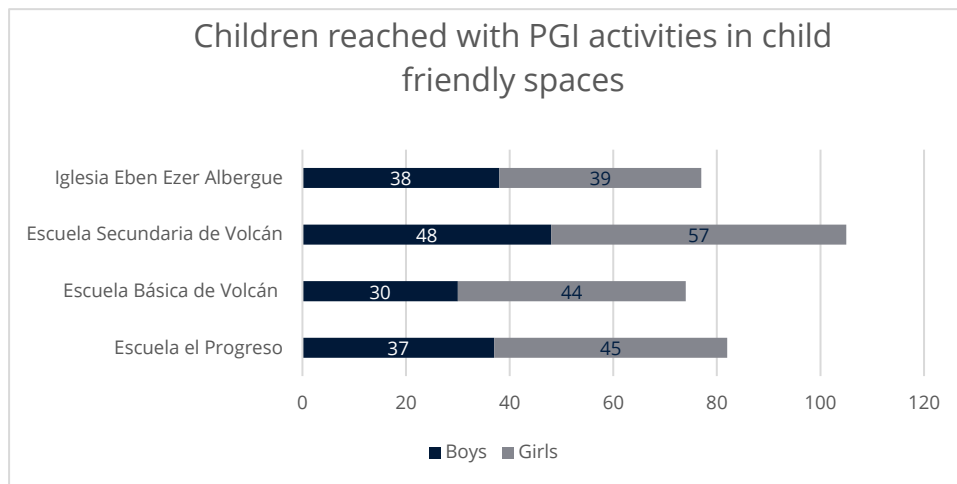


Photo: Friendly spaces. Reconditioning of a park for children Source: Panamanian Red Cross

To increase interaction, dialogue, and engagement in communities, PRC encouraged the residents of Corotú Civil, Majagual, Arco Iris and Bellas Vista to identify any actions that would make their communities friendlier.

In Corotú Civil, children did not have spaces where they could coexist and have fun. Together with the community, a park was reconditioned for the community's children; football and volleyball fields were created to promote inclusion and non-violence; and dynamic sessions were held for boys and girls, involving their parents in the activities.

In Majagual, soccer fields were created to promote inclusion and non-violence.

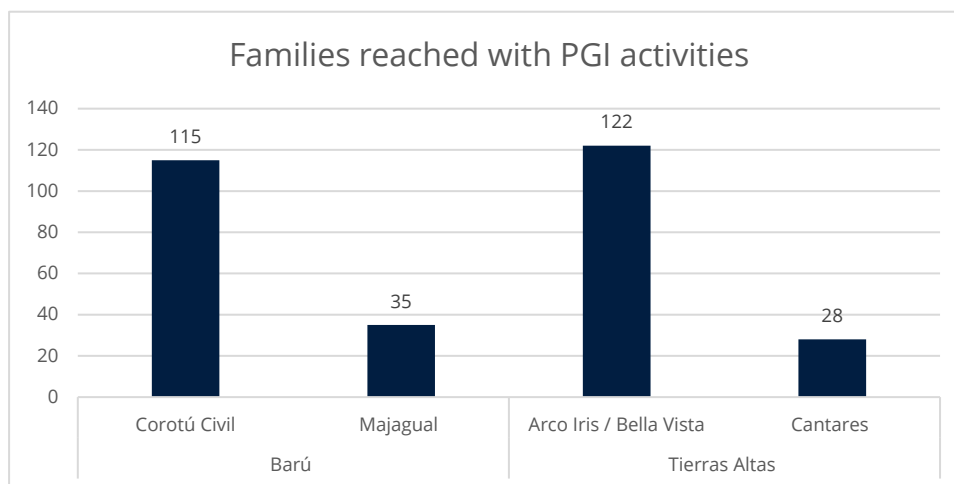
In Arco Iris, Bella Vista, spaces for flying kites were created, fostering coexistence among the children. This is an inclusive activity that that does not impose limits.

Sensitization workshops were also held on children's rights and obligations, violence prevention and gender and inclusion issues. The topics were dealt with through playful didactics, role-playing and integration games, and the children worked on abuse prevention issues.



Photo: Friendly spaces. Reconditioning of a football field.
Source: Panamanian Red Cross

Community	Women	Men	Girls	Boys	Elderly	Total
Corotú Civil	180	193	57	70	74	574
Majagual	60	67	60	54	16	257
Bella Vista / Arco Iris	216	205	172	250	72	915
Cantares	43	55	32	47	15	192
Total	499	520	321	421	177	1,938



Provide essential RFL actions and health services to unaccompanied minors.

Collective centre	Type of service	Number
Albergue escuela de Paso Ancho	Effective contact per call	12
Albergue Colegio Secundario Volcán	Effective contact per call	28
	Search request	1
Albergue Colegio California	Effective contact per call	5
Albergue Estadio Deportivo Glorias Baruenses	Effective contact per call	40
Community de Paso Ancho	Effective contact per call	36
Albergue Colegio Bilingüe de Paso Ancho	Effective contact per call	20
	Total	142

Challenges

- Despite the pandemic, it was possible to gather the community together, maintaining all biosafety measures to prevent COVID-19, where residents participated, and several issues were addressed, many of which were unknown to the community.

Lessons learned

- It is necessary to have volunteers who speak the native language, as many communities are indigenous people.

National Society Strengthening

S1.1: 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, competences and capacities to plan and perform

Indicators:	Target	Actual
# of volunteers deployed	100	100

S1 1.1 National Societies have effective and motivated volunteers who are protected

Indicators:	Target	Actual
# volunteers that receive COVID-19 PPE and visibility material	100	100

S1 1.2: National Societies have the necessary corporate infrastructure and systems in place

Indicators:	Target	Actual
# of staff hired for the operation	3	3
One lesson learned workshop is held	1	_15

S1 1.3: Effective and respected surge capacity mechanism is maintained.

Indicators:	Target	Actual
# of monitoring visit by IFRC	1	-

Narrative description of achievements

**Acquisition of visibility material for volunteers.
Delivery of PPE throughout the operation.**

All volunteers were provided with the necessary visibility and protection equipment, including COVID-19-specific PPE, to perform their actions in the field.

Psychosocial support for volunteers.

The PSS team worked on deactivation with 65 volunteers (20 female and 35 male), an intervention aimed at volunteers' self-care that allows them to share their experiences and minimize the stress that field actions could potentially cause.



Photo: Fully identified PRC volunteers and staff distributing humanitarian aid in Rio Sereno.
Source: Panamanian Red Cross

Hiring of operation personnel (1 coordinator, 1 finance and 1 field officer).

To increase its capacity to implement the DREF, the Panamanian Red Cross hired three consultants:

- 1 DREF operation coordinator
- 1 finance officer

¹⁵ The Lessons Learned workshop will be held in June 2021.

- 1 field officer

Additionally, the support of a logistic officer was added to contribute to the distribution of humanitarian aid.

The activities were implemented through deployment of the National Society's trained volunteers:

- 100 volunteers (Barú, Boquete, David, Tierras Altas, Bugaba and Panama)
- Team of PSS specialists
- Team of search and rescue specialists
- Team of NIT specialists
- CBHFA and livelihoods specialists
- Communications department staff
- NIT WASH specialists

The lessons learned workshop is being coordinated between the PRC and the IFRC to be held in mid-June 2021.

Challenges

- Long distances increased fuel expenses, which considerably increased budgeted operational expenses.
- Many of the actors and personnel who participated in the response phase are still working and carrying out actions on the ground with the communities during the recovery phase with support from donors and local governments. Therefore, despite the deadline, the Lessons Workshop could not be held before the actions' end date.
- The health risks posed by the COVID-19 pandemic have been a major challenge for the operation, to the point that the monitoring visit by IFRC personnel could not be carried out due to travel restrictions and protocols adopted to prevent further contagion.

Lessons learned

- The National Society must train people in PMER to facilitate reporting and data collection.

D. Financial Report

See Annex.

Contact Information

Reference documents

Click here for:

- [Plan of Action \(PoA\)](#)

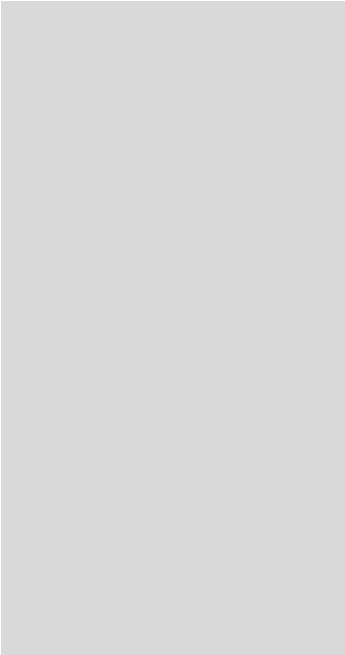
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How we work

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.

DREF Operation

FINAL FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2020/11-2021/05	Operation	MDRPA013
Budget Timeframe	2020/11-2021/02	Budget	APPROVED

Prepared on 15/Jun/2021

All figures are in Swiss Francs (CHF)

MDRPA013 - Panama - Hurricane Eta

Operating Timeframe: 11 Nov 2020 to 28 Feb 2021

I. Summary

Opening Balance	0
Funds & Other Income	149,755
DREF Allocations	149,755
Expenditure	-129,008
Closing Balance	20,747

II. Expenditure by area of focus / strategies for implementation

Description	Budget	Expenditure	Variance
AOF1 - Disaster risk reduction			0
AOF2 - Shelter	33,236	26,494	6,742
AOF3 - Livelihoods and basic needs	11,396	11,697	-301
AOF4 - Health	19,030	17,510	1,520
AOF5 - Water, sanitation and hygiene	29,743	24,866	4,878
AOF6 - Protection, Gender & Inclusion	3,089	1,004	2,085
AOF7 - Migration			0
Area of focus Total	96,494	81,571	14,923
SFI1 - Strengthen National Societies	40,849	46,259	-5,409
SFI2 - Effective international disaster management	12,412	1,179	11,233
SFI3 - Influence others as leading strategic partners			0
SFI4 - Ensure a strong IFRC			0
Strategy for implementation Total	53,261	47,438	5,823
Grand Total	149,755	129,008	20,747

DREF Operation

FINAL FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2020/11-2021/05	Operation	MDRPA013
Budget Timeframe	2020/11-2021/02	Budget	APPROVED

Prepared on 15/Jun/2021

All figures are in Swiss Francs (CHF)

MDRPA013 - Panama - Hurricane Eta

Operating Timeframe: 11 Nov 2020 to 28 Feb 2021

III. Expenditure by budget category & group

Description	Budget	Expenditure	Variance
Relief items, Construction, Supplies	88,790	75,943	12,847
Shelter - Relief	16,500	14,750	1,750
Clothing & Textiles	2,340	2,382	-42
Food	10,200	9,996	204
Water, Sanitation & Hygiene	17,262	14,029	3,233
Medical & First Aid	9,550	11,455	-1,905
Teaching Materials	2,400	6,905	-4,505
Utensils & Tools	16,968	16,208	759
Other Supplies & Services	13,571	218	13,353
Logistics, Transport & Storage	19,400	9,275	10,125
Distribution & Monitoring	1,050	1,858	-808
Transport & Vehicles Costs	9,300	5,679	3,621
Logistics Services	9,050	1,738	7,312
Personnel	24,100	30,130	-6,030
National Staff		361	-361
National Society Staff	10,200	16,659	-6,459
Volunteers	13,900	8,612	5,288
Other Staff Benefits		4,499	-4,499
Workshops & Training	1,400	207	1,193
Workshops & Training	1,400	207	1,193
General Expenditure	6,925	5,579	1,346
Travel	1,500		1,500
Information & Public Relations	1,000	1,650	-650
Office Costs	2,400	1,593	807
Communications	975	2,227	-1,252
Financial Charges	1,050	109	941
Operational Provisions	0		0
Operational Provisions	0		0
Indirect Costs	9,140	7,874	1,266
Programme & Services Support Recover	9,140	7,874	1,266
Grand Total	149,755	129,008	20,747