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# Operation Update Report N°1

## Panama: Population Movement

 International Federation  
of Red Cross and Red Crescent Societies

<b>DREF n° MDRPA015</b>	
<b>Operation update n° 1:</b> 11 November 2021	<b>Timeframe covered by this update:</b> 19 August – 29 October 2021
<b>Operation start date:</b> 19 August 2021	<b>New end date:</b> 28 February 2022 (3-month extension)
<b>Overall operation budget:</b> 481,430 Swiss francs (CHF) (including 171,953 CHF as a second allocation)	<b>Initial operation budget:</b> CHF 309,477
<b>N° of people to be assisted:</b> 11,000	<b>N° of people being assisted:</b> 3,713
<b>Red Cross Red Crescent Movement partners currently actively involved in the operation:</b> International Federation of Red Cross and Red Crescent Societies (IFRC) and the International Committee of the Red Cross (ICRC).	
<b>Other partner organizations actively involved in the operation:</b> National Civil Protection System (SINAPROC), National Border Service (SENAFRONT), Ministry of Health (MINSAs), National Migration Service (SNM), Office of the First Lady of Panama, National Mental Health Institute (INSAM), National Children, Adolescent and Family Secretariat (SENNIAF), Médecins Sans Frontières / Doctors Without Borders (MSF), United Nations Children's Fund (UNICEF), International Organization for Migration (IOM), United Nations High Commissioner for Refugees (UNHCR), Norwegian Refugee Council (NRC), Hebrew Immigrant Aid Society (HIAS), Relief & Resilience through Education in Transition International (RET International), as well as other civil society organizations and churches.	

### Summary of major revisions made to emergency plan of action:

In August 2021, a DREF Operation was initiated to meet ongoing migration needs in the Darién Gap. Through this update, the timeframe of the DREF Operation is **extended by three months** (until **28 February 2022**) and **funding is augmented to 481,430 CHF**. Expanding the scope of the operation is justified in the face of a significant and sustained increase in the flow of migrants in the Darién Gap, as well as the continued high risks associated with migration routes in the region.

Ensuring continuity to existing activities and services is prioritized, as well as maintaining current levels of personnel in the field. The objective is to reach 11,000 migrating people over six months. The proposed extension aims at extending the initial services that were part of the first allocation of funds. The only new activity included is the inclusion of 2,000 jerry cans as per pressing identified needs from the field.

Based on the scenario planning described in the needs assessment section, the proposed new allocation of funds increases the requested amount per area as follows: Shelter (CHF 11,500) (increase in the distribution of blankets from 6,000 to 8,000 people), Health (CHF 11,058) (increase in the distribution of PPE kits from 6,000 to 6,500 people, inclusion of PSS sessions for staff and volunteers, and extra items for first aid kits), WASH (CHF 47,800) (expansion of water system in service points, additional access to the latrines and showers through the

gravel materials, the inclusion of distribution of 2,000 jerrycans, and increase in the distribution of personal hygiene kits from 6,000 to 11,000 people), PGI (CHF 48,300) (increase in the distribution of transit kits from 6,000 to 11,000 people), and Migration (CHF 3,000) (extension of RCF services for additional 60 days).

The low level of implementation as it relates to distribution of non-food items (NFIs) is due to delays and issues in the procurement process, which remains impacted by the COVID-19 pandemic. Delivery of NFIs, as planned in the initial Emergency Plan of Action, was only completed in October 2021, but 66% of available items have already been distributed. All remaining distributions are expected to take place in the first three weeks of November. As for other areas of intervention – Health; Water, Sanitation, and Hygiene (WASH); Protection, Gender, and Inclusion (PGI); and Restoring Family Links (RFL) – they continue to be vital to the assistance provided to migrating populations.

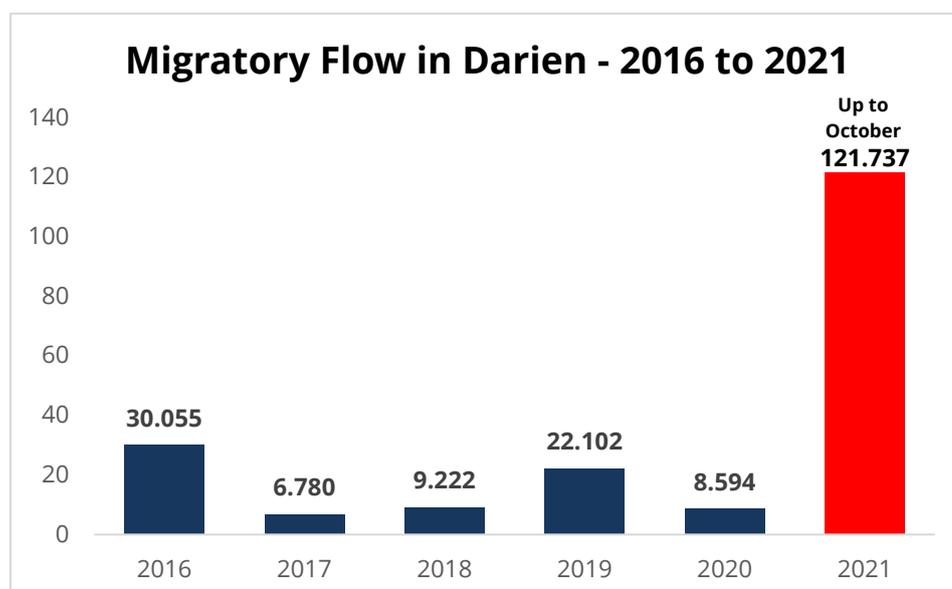
The budget therefore covers the costs necessary to meet identified needs while reinforcing existing services and is augmented by CHF 171,953 to a total of CHF 481,430.

## A. Situational Analysis

### Description of the disaster

Between June and October 2021, the migratory movement in the Darién Gap has continued its exponential rise. On average, 700 to 1,000 people make their way to the region every day. Travel conditions and hardships experienced while in transit also generate situations of extreme vulnerability, increasingly reported once individuals reach either one of the three Migration Reception Stations (or ERM, by their Spanish acronym).

Due to its geographic position, Panama is a natural point of entry for migrating populations. Nationals from more than 45 countries cross its borders daily. Since 2012, there has been a significant increase in the number of individuals who enter the Darién Gap irregularly. In 2020, 6,445 people crossed the border between Colombia and Panama; 26% were children and adolescents. Between January and June 2021, 15,949 migrants in total entered the region. This number rose to 94,693 between July and October 2021, representing a 600% increase from the previous six months. As a result, between January and October 2021, 121,737 people crossed this same border, with a sharp rise first observed in June and sustained in all subsequent months.<sup>1</sup>



The constantly changing nature of both the needs and the flow of people traveling through the Darién Gap directly impacts the humanitarian response, in which actors struggle to coordinate their efforts. Furthermore, the regional Ombudsman Office (Defensoría del Pueblo) has indicated in a recent press release that government organizations and their partners remain unprepared for the high volumes of persons who arrive daily in Bajo Chiquito, the first ERM along the route, but are actively seeking to implement measures to meet basic needs

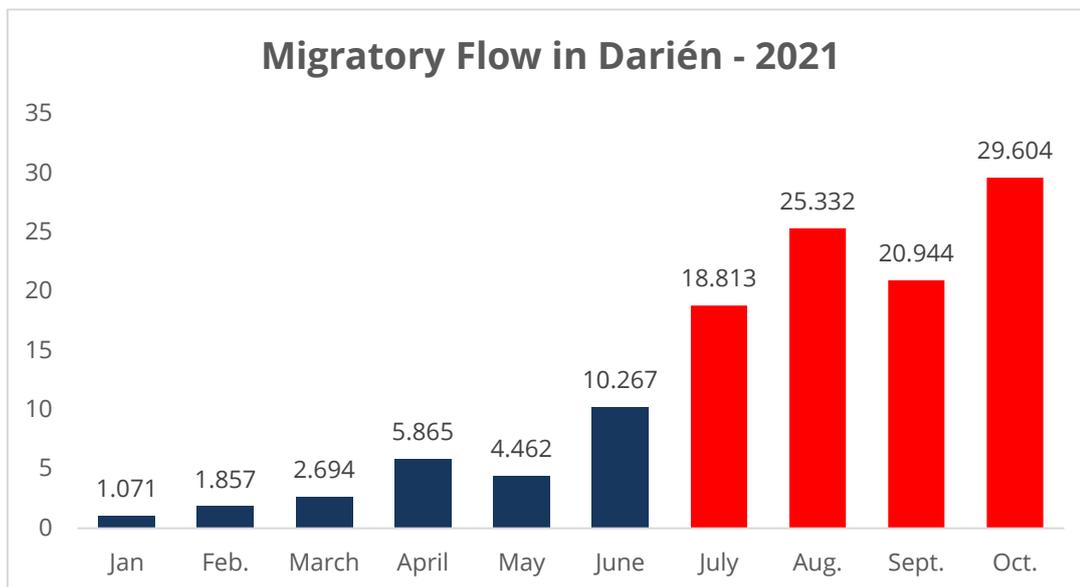
and provide safe spaces to all.<sup>2</sup> The Ministry of External Relations has expressed its support of humanitarian

<sup>1</sup> Panama National Migration Service, [Tránsito irregular de extranjeros por la frontera con Colombia](#), October 2021.

<sup>2</sup> Defensoría del Pueblo, [Defensoría da seguimiento a condiciones de migrante](#), 16 October 2021.

agencies in the region<sup>3</sup> and has arranged for supplies to be sent to the ERMs through the Regional Logistics Hub for Humanitarian Assistance.

Of those who reach the ERMs, a significant majority are from the Antilles (79%), alongside smaller proportions of individuals from South America (16%), Africa (3%) and Asia (2%). High numbers of Haitians are consistently reported, followed by Cubans, Chileans, Brazilians, Bangladeshi and Senegalese.

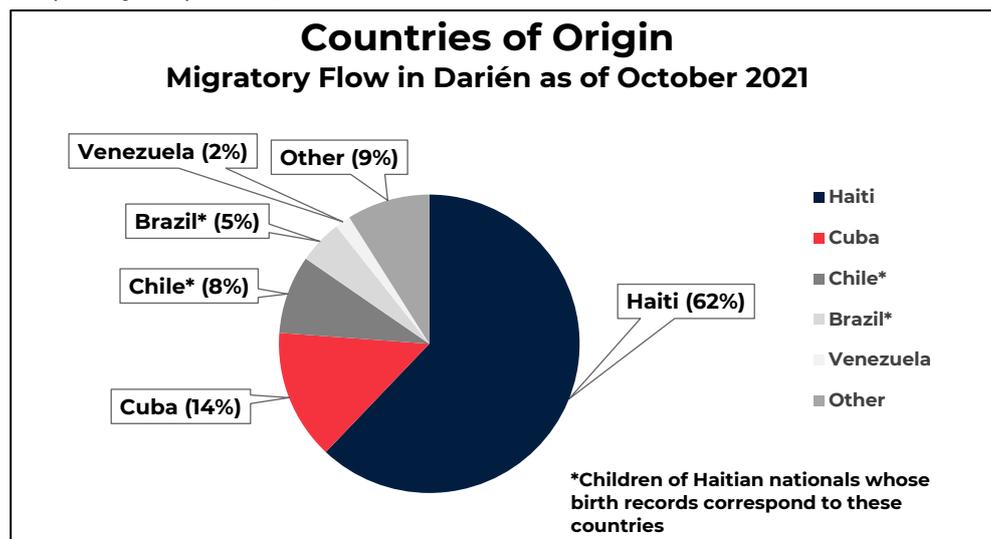


Those who travel across the Darién Gap and its jungle face enormous challenges, effectively risking their lives along the way. Organized crime is endemic, and sexual violence is frequently used as a deterrent to migration by communities in the region. 61% of individuals who cross the border are men and 39% women; 77% are adults, and 23% are

minors.<sup>4</sup>

Border officials first meet and receive individuals in Bajo Chiquito, a community of 450 people located near what is considered to be the Darién Gap exit point. Previously, migrants were then transferred to La Peñita, an even smaller community (population: 160). However, the La Peñita ERM was officially closed on 26 January 2021.

There are now three active ERMs in the region: Bajo Chiquito, where up to 1,900 individuals have been accommodated daily, even though no established, government-managed shelter options exist at this time; Lajas Blancas, whose maximum capacity of 400 is frequently exceeded; and San Vicente, whose maximum capacity, less frequently surpassed, is also 400.



In both Lajas Blancas and San Vicente, the Panamanian authorities have implemented a process of "Controlled Flow" (*Flujo Controlado*)<sup>5</sup>, which consists of various steps: vaccination of part of the migrant population<sup>6</sup>; use of biometrics for registration; validation of migratory status; coordination with Costa Rican migration authorities to facilitate transit across the northern Panama border. On

<sup>3</sup> Ministerio de Relaciones Exteriores, [Canciller Erika Mouynes viaja Darién para conocer difícil trayecto de emigrantes irregulares](#), 26 April 2021.

<sup>4</sup> Panama National Migration Service, [Tránsito irregular de extranjeros por la frontera con Colombia](#), October 2021.

<sup>5</sup> Gaceta Oficial de Panamá, [Ministerio de Seguridad Pública - Decreto Ejecutivo No. 121](#), 15 March 2019

<sup>6</sup> La Estrella de Panamá, [La Corte IDH ordena a Panamá incluir a migrantes en la vacunación contra la Covid](#), 27 July 2021

average, the process takes 1 to 3 days to complete. However, the global context and the COVID-19 pandemic have slowed the flow of individuals.

Once the process is completed, individuals who can cover the cost of transportation are transferred to another ERM in the Chiriquí province, named Los Planes de Gualaca. From this point, migrants are then moved to Ciudad de David, where buses, taxis and private vehicles are available, at a price, to take them to the Costa Rican border. Following this cross-border dynamic, the IFRC is intensifying its efforts to provide protection and humanitarian assistance to migrating populations: the Costa Rican Red Cross is currently implementing a DREF operation ([MDRCR020](#)) for preparedness activities to respond to a potential increase in migration flows from Panama.<sup>7</sup>

Over the past two years, Panamanian authorities have spent approximately \$20 million to assist migrating populations who enter the country irregularly.<sup>8</sup> Their number has continued to rise in 2021 and is expected to keep growing, with the latest Ministry of Public Security projections indicating that 150,000 individuals could have migrated through Panama by the end of the year.<sup>9</sup> This record number would reach or exceed the total volume of people who transited through the Darién Gap between 2010 and 2019, during which 109,293 individuals crossed the border. According to these projections, almost 60,000 additional people could then be expected to migrate through Panama in the last quarter of 2021.

In this context, present levels of government efforts and humanitarian assistance are insufficient. It is vital to ensure continuity in areas of intervention where major gaps and needs have already been identified: health, hygiene promotion, distribution of non-food items, provision of safe drinking water, and maintenance of temporary shelter structures, whose deterioration is accelerated by adverse weather conditions. Other priorities include expanded access to Restoring Family Links (RFL) and Protection, Gender, and Inclusion (PGI) services, as well as increased psychosocial support for migrating populations and humanitarian personnel in the field.



*Panamanian Red Cross Society – Hygiene promotion workshop, Lajas Blancas, October 2021.*

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<sup>7</sup> IFRC, [La IFRC aumenta su asistencia humanitaria ante número récord de migrantes cruzando el peligroso tapón del Darién](#), 20 September 2021.

<sup>8</sup> Agencia EFE, [Panamá necesita ayuda y solidaridad internacionales ante la ola de migrantes](#), 15 October 2021.

<sup>9</sup> La Estrella de Panamá, [Minseg proyecta más de 150 mil migrantes este año](#), 15 October 2021.

## Summary of the current response

### Overview of Host National Society

Aiming to prevent suffering and reduce the vulnerabilities and needs of migrants, the Panamanian Red Cross Society (PRCS), with the support of the International Federation of the Red Cross and Red Crescent (IFRC), began planning its response to population movement in 2015.

The provision of humanitarian services began 1 December 2015, when the National Society activated its first humanitarian assistance activities for migrants in Puerto Obaldia, on the border between Colombia and Panama: Population Movement, [DREF Operation no. MDRPA011](#). As part of the [regional Population Movement Emergency Appeal](#), the National Society has worked with the IFRC to provide humanitarian assistance to people on the move in Darién, increasing its capacity and positioning itself in the field as a specialized and experienced actor.

The National Society has continued to provide assistance to migrant populations and has become one of the most important actors in the region, prioritizing services according to context and needs. The PRCS worked alongside the IFRC and collaborated with the International Committee of the Red Cross (ICRC) to ensure access to Restoring Family Links (RFL) protection supports.

Between December 2019 and 30 September 2021, the PRCS has supported more than 40,000 people through humanitarian assistance and services provided in the field, supporting different inter-agency coordinating committees, operations, and programs.

The National Society is aware that emergency responses also create opportunities for further organizational development and that lessons learned workshops are crucial to enhance decision-making strategies. Workshops were held following the 2015 DREF. In June 2021, after the end of the regional Population Movement Emergency Appeal, and more recently in September 2021, in the context of the Darién response.

As mentioned previously, there was a sharp increase in cross-border movement beginning June 2021. The PRCS scaled up its response in Darién but could not meet the basic needs of people transiting through the region. Consequently, the National Society, the IFRC, and the ICRC joined forces and convened a series of high-level meetings with Panamanian authorities in June 2021. The objective was to draw attention to the increased humanitarian impacts and the genuine threat to the sustainability of services provided.

### Overview of Red Cross Red Crescent Movement in Country

Through the General Director, the National Society maintains in constant communication with Partner National Societies (PNS) present in the country through regional delegations. The American Red Cross (ARC) offers support to the PRCS in organizational development. The Canadian Red Cross (CRC) has collaborated bilaterally with the PRCS on health-related activities linked to COVID-19.

The IFRC Americas Regional Office and the Regional Logistics Unit (RLU) are in Panama. The PRCS has been coordinating its actions with the IFRC Regional Office's Disaster and Crisis Prevention Department. Since 2019, the IFRC has supported the National Society in Darién with dedicated staff through the regional Emergency Appeal and support from a UNICEF project.

This allocation will be focused on supporting urgent needs. Nevertheless, on the current complex migratory flows in the region, the risks, and humanitarian needs, the IFRC has initiated the development of a Case for Support proposal to define an intervention logic adapted to mixed flows, considering regional and local capacities. This approach seeks to consolidate a comprehensive and sustainable preparedness, response, and recovery model that allows National Societies to maintain in the mid and long-term assistance to the humanitarian needs of migrants in countries of origin, transit, and destination. It will support durable solutions backed with a solid strategic, programmatic framework and resource mobilisation.

The IFRC regularly leads coordination meetings with the National Society and other Movement components involved in the regional population movement response: Colombian Red Cross, Costa Rican Red Cross, and the ICRC. More than ten meetings have been held since June 2021. Shared objectives include open communication and heightened coordination, as well as validation of information relevant to all operations, in the context of regional and extracontinental migratory flows, from Chile to Guatemala. The August earthquake in Haiti, for example, has led to a concerted increase in RFL and information services along the route.

Since the onset of the response, the ICRC has collaborated with the PRCS to support its volunteers in the region and provide RFL services through call points. In organizational development, the ICRC allocates funding for a PGI field position within the PRCS. The ICRC has also engaged with the authorities to foster better inter-institutional coordination, focusing on strengthening the response to protection issues and needs.

Additionally, the ICRC promotes and shares forensic best practices with the Panamanian authorities. It also works with members of the National Border Service, SENAFRONT, to remind them of the principles governing force use.

### Overview of Non-RCRC Actors in Country

Inter-agency coordination meetings are held regularly to share information, harmonize services in the field and monitor security situations. The Panamanian National Border Service, SENAFRONT, oversees all activities in the ERMs, and contacts are frequent with all humanitarian actors.

Actor	Actions
<b>International Non-Governmental Organizations (INGOs)</b>	
Médecins sans Frontières (MSF)	<ul style="list-style-type: none"> <li>• Medical team in the Bajo Chiquito ERM (permanent service point).</li> <li>• Rotating medical teams in the Lajas Blancas and San Vicente ERMs.</li> <li>• Medical, psychological and logistics personnel.</li> </ul>
Hebrew Immigrant Aid Society (HIAS)	<ul style="list-style-type: none"> <li>• Rotating teams in the Lajas Blancas and San Vicente ERMs.</li> <li>• Support to underage survivors of sexual violence.</li> <li>• Violence prevention activities.</li> <li>• Menstrual health and hygiene workshops and support.</li> </ul>
Relief & Resilience through Education in Transition International (RET International)	<ul style="list-style-type: none"> <li>• Rotating teams in the Lajas Blancas and San Vicente ERMs.</li> <li>• Child-friendly spaces.</li> <li>• Psychosocial support for children.</li> </ul>
Norwegian Refugee Council (NRC)	<ul style="list-style-type: none"> <li>• Information, assistance and legal counsel to asylum seekers and refugees in Panama for all 3 ERMs.</li> </ul>
<b>United Nations Agencies</b>	
United Nations Children's Fund (UNICEF)	<ul style="list-style-type: none"> <li>• Overall monitoring of children's needs in the region.</li> <li>• Child case management support.</li> <li>• Funding and support to implementing partners (including the PRCS) in child and maternal health, WASH and child protection.</li> </ul>

	<ul style="list-style-type: none"> <li>• Main PRCS partner in the field.</li> </ul>
International Organization for Migration (IOM)	<ul style="list-style-type: none"> <li>• Monitoring of migration flows in the Lajas Blancas and San Vicente ERMs.</li> <li>• Training of border personnel on the care of migrants in vulnerable conditions.</li> <li>• Support to improvements of existing installations in ERMs.</li> </ul>
United Nations High Commissioner for Refugees (UNHCR)	<ul style="list-style-type: none"> <li>• Assistance, legal counsel, and access to international protection processes.</li> <li>• One-time provision of shelter installations in the San Vicente ERM.</li> </ul>
United Nations Office for the Coordination of Humanitarian Affairs (OCHA)	<ul style="list-style-type: none"> <li>• Multi-country coordination of the humanitarian situation (Colombia – Panama – Costa Rica).</li> </ul>
<b>Government Authorities</b>	
National Border Service (SENAFRONT)	<ul style="list-style-type: none"> <li>• Control, security, and management of ERMs.</li> <li>• Provision of meals.</li> <li>• Transfers between ERMs, jointly with the National Migration Service (SNM).</li> <li>• Registration and biometrics, jointly with the National Migration Service (SNM).</li> </ul>
Ministry of Health (MINSA)	<ul style="list-style-type: none"> <li>• Medical team deployed sporadically in ERMs.</li> <li>• Adoption of technical standard on mental health for refugees and migrants.</li> </ul>
National Children, Adolescent and Family Secretariat (SENNIAF)	<ul style="list-style-type: none"> <li>• Responsible to ensure the rights of children and adolescents are respected.</li> <li>• Component of active referral paths for children and adolescent migrants.</li> </ul>
National Civil Protection System (SINAPROC)	<ul style="list-style-type: none"> <li>• Presence in the San Vicente ERM to support daily surveillance of sanitary measures, emergency care and attention, and other security tasks managed jointly with SENAFRONT.</li> </ul>
Ombudsman Office (Defensoría del Pueblo)	<ul style="list-style-type: none"> <li>• Monitoring visits to ERMs to ensure needs-based requests from migrating populations and host communities are examined and addressed.</li> </ul>

## Needs analysis and scenario planning

### Needs Analysis

So far, in 2021, 91,305 migrating people have crossed the border between Colombia and Panama, a figure equivalent to that of all arrivals registered in the past four years. Driven by socioeconomic and political turmoil, natural disasters and the effects of the global COVID-19 pandemic, migrants travel through the Darién Gap, a 266-kilometer jungle area. Their objective: cross South America and the northern triangle of Central America, reach Mexico, and finally make their way to the United States. The majority are Haitians, many of whom had first relocated to Chile and Brazil after the devastating 2010 earthquake.

This journey leads them through some 575,000 hectares, where overland roads are few and where rivers flow dangerously fast.

## Shelter

In the Darién region, after adopting a strategic plan, shelter management is coordinated and led by SENAFRONT and the IOM.

In the **Bajo Chiquito ERM**, 90% of the migrant population lives in small individual tents, which they have acquired along the way. The host community has identified specific spaces for tents, rented by landowners to migrating individuals and families. The community, with support from SENAFRONT, is responsible for the management of the tent areas.

Local infrastructure in Bajo Chiquito is insufficient to accommodate the drastic increase in new arrivals. Since August 2021, there have been instances where the total number of migrants in the community has exceeded 2,000.

The **Lajas Blancas ERM** was built in 2015-2016, on privately-owned land rented by government authorities. Its maximum capacity was established at 400 people, and its layout plans for a camp-like organization of services, with support from key partners (IOM, UNICEF). Family-size tents were installed on wooden structures for communal use services. Two Rubb Halls (large, relocatable tent-like structures) were also put up; one of them, now partially damaged, is used as an isolation ward for COVID-19 positive cases, while the other accommodates direct contacts of the latter.

The family-size tents are now severely deteriorated, to the point where they no longer meet Sphere minimum standards and are not used by migrating populations.

The National Migration Service (SNM) is responsible for transfers between ERMs, registration of individuals, and organization of transport out of the Darién region. For those who can cover the cost of transportation to Planes de Gualaca, near the Costa Rican border, transitioning out of the Lajas Blancas ERM takes between 1 and 8 hours. Those who lack sufficient economic resources to continue their journey need on average 1 to 3 days to raise the required sum. Many reach out to family members abroad and arrange for money transfers, whereas others barter with ERM authorities (SENAFRONT) to cover the cost of passage by doing janitorial work. Instances of transactional sex have also been reported. In either situation, adapting the waiting and living areas to the needs of migrants remains essential.

Shelter capacity in the Lajas Blancas ERM has been exceeded, in part because many people take longer to raise funds, and in part because the isolation ward for COVID-19 positive cases is located on the site, with family groups staying put until the isolation period of their loved one(s) is completed. The inclement weather and the lack of permanent infrastructure or facilities to provide safe and dignified living areas exacerbate shelter needs.

As for the **San Vicente ERM**, it was built between July and September 2020. Its installations are relatively new, are connected to the national power grid, and have a maximum capacity of 400. Two types of shelter were initially installed: Refugee Housing Units (RHU), and plastic family tents.<sup>10</sup> Most are now deteriorated and unused, with the better part of the migrant population choosing to put up individual tents instead.

UNHCR plans to donate wood-based materials to support the renovation and maintenance of current shelter options in the Lajas Blancas and San Vicente ERMs.

In all three ERMs, migrating populations arrive with few belongings. The conditions of transit through the Darién Gap and outright theft often force them to abandon personal possessions. For most, the light blankets

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<sup>10</sup> IFRC, *Informe de evaluación – Panamá Movimiento Poblacional*, September 2021.

distributed by the PRCS are the only item they have to protect themselves from the elements or act as a change of clothes for infants and small children.

## **Health**

The PRCS, with IFRC support, provides health services through its Humanitarian Service Point. Maternal and child health are prioritized, with nutrition identified as a primary concern. Services are provided five days/week in the Lajas Blancas and San Vicente ERMs, and bimonthly in the Bajo Chiquito ERM, accessible only by boat.

The PRCS has reinforced its services, in coordination with UNICEF and the IFRC, by integrating two new health staff to the existing Humanitarian Service Point team. The support provided is mainly oriented towards maternal and infant care, as well as pregnant and lactating mothers. Data collected in the field indicates that since August 2021, PRCS has performed nutritional screening, using the MUAC tape, on 1,912 children (982 boys, 930 girls), all of them under 5 years old.

Through its Humanitarian Service Point and Health teams, regularly deployed in the Lajas Blancas and San Vicente ERMs, the PRCS has also continued its health promotion activities, including sexual and reproductive health, maternal health, mental health, and COVID-19 prevention.

In Bajo Chiquito, the small health centre is currently supported by MSF and MINSAs teams, though health supplies remain limited. The PRCS, with support from the IFRC, has provided MSF with essential medication, stretchers, and hygiene kits.

Since August 2021, the demand for health care has risen drastically, in line with the large number of migrants arriving daily in the ERMs. The extreme travel conditions experienced in the jungle generate increased health care needs. Reported cases include dehydration, malnutrition, arterial hypertension, injuries and wounds in the extremities (feet, hands), respiratory problems, gastrointestinal infections, dermatological disorders, and requests for reproductive health services. The cumulative stress and fatigue experienced by health personnel, as well as the limited availability of health supplies, remain important challenges.

The difficulties and uncertainties of the migratory journey also take their toll: requests for psychosocial and psychological assistance are increasing. RET International, with support from UNICEF, provides psychosocial support services to children in the Lajas Blancas and San Vicente ERMs

The health care service areas are located some distance away from the ERM points of entry. When migrants first disembark from the canoes, open wounds in the lower extremities, heat exhaustion, weakness, and dehydration are often observed. Deploying safe and adequate equipment to facilitate the transport of patients, such as stretchers and wheelchairs, remains a priority.

Overcrowding, lack of personal protective equipment (PPE), sporadic cleaning measures, and insufficient sanitary installations are also common to all three ERMs. Preventing the spread of COVID-19 through the promotion of hygiene practices is challenging but highly necessary.

## **Water, Sanitation and Hygiene (WASH)**

Access to safe drinking water has a direct impact on the health of migrant populations. The PRCS, with support from the IFRC and UNICEF, has installed and is currently operating water treatment plants in the Lajas Blancas, San Vicente and Bajo Chiquito ERMs, and in the La Peñita community.

The Panama Institute of Aqueducts and Sewers (IDAAN) has responded to the National Migration Service (SNM) request to augment water supply to ERMs and host communities. Still, it is struggling to meet the needs. None are currently in the function of the three solar-powered water treatment plants initially installed by SINAPROC in the Lajas Blancas ERM. Safe drinking water is provided on-site, including in the COVID-19 isolation areas, through the PRCS water treatment plant and its associated distribution network.

Water systems have come under stress due to the sharp rise in people transiting through the Darién Gap. In the San Vicente ERM, where most of the water used to fulfill essential necessities comes from the local municipal water supply, the host community is now facing water shortages. In the Lajas Blancas ERM, where overcrowding is significant, efforts are underway to augment the production capacity of the PRCS water plant. In both the Lajas Blancas and the Bajo Chiquito ERMs, water pumps function for extended periods to meet demand, resulting in more frequent breakages. Interruptions, however brief, have an immediate impact on family groups and individuals, as sources of free, safe drinking water are otherwise nonexistent.

The current difficulties of the climate, including heavy rains and high levels of humidity, require constant monitoring and maintenance of the water treatment plants and their associated water distribution system. As the region will be entering its dry season at the end of December, another risk is rearing its head: a sudden decrease in water levels in the region, specifically in the rivers used by the PRCS water treatment plants.

Sanitary installations are scarce in all three ERMs. Showers, toilets, and hand-washing stations are insufficient in number, and maintenance work has been neglected. The PRCS, with support from the IFRC and UNICEF, has undertaken urgent repairs to preserve the dignity of individuals.

The joint PRCS – IFRC – UNICEF WASH Strategy, revised and updated in October 2021, focuses on providing access to safe drinking water, distributing hygiene kits, and implementing hygiene promotion activities. Distributions remain crucial as most migrants reach the ERMs with very few personal possessions, much less the essentials required to ensure personal hygiene. As for hygiene promotion, activities are currently centered on hand-washing practices and targeted messaging through group workshops to prevent the spread of COVID-19. Lack of signage and visual, universal messaging has also been identified as a difficulty by newly-arrived individuals and family groups, who sometimes struggle to understand the layout of ERMs. The PRCS, with support from the IFRC, has mapped all water and sanitation service points in both the Lajas Blancas and San Vicente ERMs, and plans to display simplified plans of the sites in key locations.

Droughts are expected in the coming months, based on known seasonal cycles in the Darién region; in this context, providing access to safe drinking water could be made even more difficult. During a recent dry season, the water level in the Chucunaque river, which flows in the area where the ERMs are located, was so low that daily water cut-offs were imposed in local communities. With the current volume of migrating people transiting through the region, the stress put on water systems could be acute.

## **Migration**

The PRCS, with support from the IFRC and the ICRC, has implemented Restoring Family Links (RFL) services, mostly oriented towards connectivity access. The goal is to allow migrating populations to share their current situation and location with family and friends abroad. Since individuals face tragic situations during travel, including losing loved ones, accessing their support system is essential.

There is a need to continue strengthening staff and volunteer knowledge and understanding of migration issues. The migratory context in the Darién Gap is constantly evolving; differentiated assistance to populations must be regularly revisited and adjusted. To build capacity in this regard, the PRCS has developed a Migration Policy, which clearly articulates its strategy, mandate, and determination to provide quality, needs-based support to migrating populations.

## **Protection, Gender, and Inclusion (PGI)**

Protection activities are crucial. Migrating populations are exposed to the dangers of long-distance travel, violence, wild animals and unfamiliar natural environments, unforeseen separations from loved ones, and numerous health issues. The greater part of reported incidents involves women and members of the LGBTQIA+ community.

Women who cross the Darién Gap face a violent and discriminatory social environment. They report various manifestations of violence, including physical harm, sexual abuse, rape, kidnapping, extortion, exploitation, and trafficking. The latter is linked to drug trafficking and other illicit activities in the region. The situation is difficult and requires both united efforts and robust coordination mechanisms among government actors with protection mandates, such as the National Migration Service (SNM), the National Children, Adolescent and Family Secretariat (SENNAF), the Ministry of the Public Prosecutor, the National Border Service (SENAFRONT), the Ministry of Health (MINSAs), the National Disability Secretariat (SENADIS), and the Ombudsman Office (Defensoría del Pueblo). In support of established public services, humanitarian organizations also joined forces to enhance child protection and develop a differentiated approach to migration protection issues.

Despite sustained interventions and the creation of coordination and engagement mechanisms, both migrating populations and members of host communities still frequently face protection issues. Individuals in transit and the organizations who support them have identified protection risks from Colombia and all through the Darién Gap, as well as in the ERM's themselves. According to data collected in the field, the most reported protection issues include lack of access to specialized health services, sexual and gender-based violence, forced displacement and persecution, and mental health issues.

Interagency committees were established to develop common minimum standards and referral paths to address those risks in a concerted manner. The shared objective is to advocate for measures and resources in line with the needs observed. Standardized referral paths do exist, but their implementation has only been partial. This represents an important risk for the individuals themselves and given the commitments undertaken by institutions and organizations. In accordance with the latter, the PRCS is overseeing the creation of a Protection Group to review and analyze the use and efficiency of existing referral paths and follow protection trends in the field. The aim is to collect quantitative and qualitative data on the operational management of protection issues, enhance processes, and improve support for migrating populations.

## Scenario Planning

Scenario	Humanitarian Consequence	Potential Response
<p><b>Best-case scenario:</b></p> <p>Decrease in or usual flow of migrating populations, compared to estimates for the period of August to October.</p> <p>~11,000 people/month.</p> <p>Duration of stay ~1 to 2 days.</p>	<p>Humanitarian assistance is provided to people who require it. The short duration of stays means the level of assistance provided is sufficient to meet demand without major setbacks.</p>	<p>Maintain close coordination with the authorities for the provision of humanitarian assistance based on the analysis of needs that have not yet been met. Response planning for both actions and resources does not require significant changes.</p>
<p><b>Most likely scenario:</b></p> <p>Increase in flow of migrating populations arriving in Panama, compared to estimates for the period of August to October.</p> <p>~16,000 people/month, with increase of up to 5,000 people for each subsequent month.</p>	<p>Services are not sufficient, given the increasing volume of people. Impacts on the environment (waste management) are observed. Health, water, and sanitation services are saturated.</p> <p>Despite the short duration of stay, the volume of people requiring assistance extends the length of working days for humanitarian actors in the field. Health care</p>	<p>Coordination with other actors is strengthened. Mental health and psychosocial support are provided to both the target population and personnel in the field. PGI strategies are applied. Humanitarian assistance in WASH and health is reinforced. Surge resources are deployed in the field to ensure assistance continues to be provided according to Do No Harm principle.</p>

<p>Duration of stay ~1 to 3 days, with approximately 15% of people unable to cover the cost of transport to northern border due to lack of resources.</p>	<p>infrastructure capacity is impacted. WASH services are unable to meet demand.</p>	
<p><b>Worst-case scenario:</b></p> <p>Heavy rains affect the flow of migrating populations, compared to estimates for the period of August to October.</p> <p>~21,000 people/month.</p> <p>Duration of stay is increased to ~4 days, with approximately 20% of people unable to cover the cost of transport to northern border due to lack of resources.</p>	<p>Health conditions are worsening in ERMs. Requests for assistance have increased due to the extended duration of stay. Health care infrastructure capacity is impacted. WASH and health services are unable to meet demand.</p>	<p>Coordination with other actors is strengthened. Mental health and psychosocial support is provided to both the target population and personnel in the field. PGI strategies are applied, including safeguarding mechanisms. Humanitarian assistance in WASH and health is reinforced. Surge resources are deployed in the field to ensure assistance continues to be provided according to Do No Harm principle. As a potential response, the EPoA will be reviewed to ensure coherence in our response options and complementation action with other support from other sources of funds.</p>

## Risk Analysis

PRCS personnel deployed to the response are exposed to various risks given the context of the affected area. The current rainy season can impact roads and land communication, making it difficult to move safely. The occurrence of meteorological phenomena that could further affect the fragile road infrastructure of the region cannot be ruled out.

Volunteers and staff can also be affected by the outbreak of diseases resulting from limited access to safe water in the areas of assistance, so special care must be taken to ensure all necessary supplies are procured.

Risk mitigation for field operations is achieved by implementing a security plan and associated protocols, which will be duly reviewed with personnel traveling to the region.

Safety protocols also apply to the fleet vehicle used to mitigate risks associated with unsafe driving and preventable incidents. Regular vehicle inspections are required.

The National Society's response considers the current context of risk related to the COVID-19 pandemic and has planned for the availability and proper use of personal protection equipment for staff, volunteers, and the target population. The PRCS will continue to monitor the situation closely and modify the plan if necessary, considering the evolution of the COVID-19 situation and the associated operational risks, including operational challenges related to access to migrating populations.

The operation could be affected by the change of context or even the protocols established by the States of Panama and Colombia, such as the "Controlled Flow" processes. Restrictions to mobility could hinder access to the target population. Likewise, an increase in migratory flows could warrant revising both this action plan and the PRCS and IFRC contingency plan. Migration government policies act as a catalyst for population movements.

Political and/or socioeconomic context, especially when characterized by lack of access to livelihoods and basic health services, drive individuals and families to migration.<sup>11</sup> Current structural, wide-ranging issues in Nicaragua<sup>12</sup>, Chile<sup>13</sup>, Haiti<sup>14</sup>, and Venezuela<sup>15</sup> will continue to contribute to an increase in population movements.

Finally, this DREF operation and its operational strategy consider the risks related to the current COVID-19 pandemic. It is aligned with the IFRC global emergency appeal that supports National Societies in providing assistance and support to communities affected or at risk of being affected by the COVID-19 pandemic.

## B. Operational Strategy and Plan

### Overall Objective

The PRCS aims to continue providing humanitarian assistance to populations who transit through the Darién Gap. The proposed actions are concentrated in the points of attention in the Bajo Chiquito, Lajas Blancas and San Vicente ERMs, and in the La Peñita community, based on needs and operational demands.

The strategic approach is based on the PRCS contingency plan, whose care coverage began with the objective to reach 6,000 people. Due to the sharp rise in daily arrivals, the target population has now been increased to 11,000 people.

Therefore, the revised objective is to scale up assistance services to migrating populations who are crossing the border between Colombia and Panama, and subsequently the Darién Gap. According to the National Border Service (SENAFRONT), numbers are expected to rise over the next quarter.

All actions will be carried out following the role established by the humanitarian mandate of the National Society in the country and the international standards of the Red Cross and Red Crescent Movement, in line with the context-specific to the Darién Gap and the global migration strategy. The National Society seeks to continue to provide humanitarian assistance in its role as auxiliary to the public authorities in shelter; health; water, sanitation and hygiene; migration; and protection, gender and inclusion.

A surplus balance on the initial allocation of 309,477 CHF will be reattributed to procurement items for immediate use in the field: light blankets, tarpaulins, first aid kits, and essential health supplies.

This request, which comprises both an extension and an augmentation of funds, aims to ensure the continuity and intensification of the work undertaken in the field with other actors, in line with the scope of the humanitarian needs observed. In this sense, the proposed strategy is based on maintaining and advocating for permanent coordination mechanisms established with local authorities and organizations to ensure that efforts are not duplicated, and that complementarity is actively sought and developed. The PRCS has also secured additional funding sources to guarantee the sustainability of activities in the field. Strong coordination with other National Societies, specifically with the Colombian Red Cross Society and the Costa Rican Red Cross Society, is also one of the pillars of continuity.

### Operational Support Services

#### Human Resources

<sup>11</sup> Pedroza, Luicy and López Noriega, José Luis, [Las políticas migratorias en América latina ante los recientes flujos intra y extrarregionales](#), Friedrich Ebert Foundation, April 2020.

<sup>12</sup> Confidencial, [Migración nicaragüense seguirá en ascenso en 2021](#), 3 October 2021.

<sup>13</sup> BBC New Mundo, [¿El fin del "sueño chileno"? los migrantes que luchan por permanecer en un país que les cierra las puertas](#), 27 May 2021.

<sup>14</sup> BBC News Mundo, ["La condición de los haitianos de migrantes invisibles está vinculada al racismo en muchos países de América"](#), 27 September 2021.

<sup>15</sup> Voz de América, [La migración venezolana: ¿Qué esperar según los expertos?](#), 4 August 2021.

To ensure continuity, the National Society will extend the two positions initially contracted to support the implementation of DREF activities under this DREF allocation:

- 1 Operations Coordinator
- 1 Finance Assistant

Additionally, and through the IFRC Rapid Response system, 2 distinct profiles will be deployed to support DREF activities, for 2 months each:

- 1 Water, Sanitation and Hygiene (WASH) Coordinator
- 1 Field Coordinator

The PRCS has already contracted the following personnel, through other funding, for their migration response:

- 1 Field Coordinator
- 5 Health staff
- 5 WASH staff
- 3 Support Services (Finance) staff

Response activities will be implemented through the mobilization of the following trained personnel by the NS:

- 30 volunteers, from the regional branch and brigades
- Psychosocial support specialists
- National Intervention Team (NIT) specialists
- NIT WASH specialists
- Community-Based Health and First Aid personnel
- Communications personnel

All staff and volunteers will have insurance coverage, which is already funded through another operation. They will be provided with the necessary visibility items and COVID-19 personal protective equipment.

## **Logistics and Supply Chain**

The IFRC Regional Logistics Unit will continue to procure the humanitarian assistance items required by the response and will provide logistics support to the PRCS when and if needed.

The PRCS will continue to oversee the procurement of goods and services, transportation, and storage. The PRCS procurement department will ensure these processes are executed according to National Society procurement manual guidelines.

Distributions will continue to be coordinated with relevant partners and institutions, as required. The main logistical challenge in the Darién region, apart from the climate, is that some communities are only accessible by boat. Therefore, operational costs can be higher than usual since communities need to make arrangements to ensure distributions are completed.

## **Security**

The PRCS will ensure that volunteers continue to receive appropriate security training before being assigned to the response. An easy-to-read, two-page handout was developed for this purpose and shared with volunteers before their first briefing. All staff and volunteers will continue to be briefed on established security guidelines before going to the field. They will also be provided with both visibility items and COVID-19 personal protective equipment.

Additionally, the PRCS will consistently apply and monitor compliance with COVID-19 protocols, in line with the duty of care for volunteers and staff. These same COVID-19 protocols also aim to protect migrating populations from harm further.

## Planning, Monitoring, Evaluation, and Reporting (PMER)

The PRCS Programme Manager, together with the Director General and the Finance Coordinator, will continue to be responsible for monitoring, overseeing, and delivering reports for the Emergency Plan of Action.

Disaggregated data collection tools, compatible with mobile devices and used by teams in the field, were developed to record the number and type of health services provided and non-food items distributed.

Progress and accountability reports will continue to be shared continuously. Monitoring visits in the field and interviews with members of the target population, volunteers, staff, and other actors will also be implemented. A satisfaction survey is also planned to measure progress against objectives further.

The PRCS will continue to maintain strong lines of communication and coordination with the IFRC PMER focal point. IFRC minimum reporting standards will guide all reporting for the operation. A final report, as well as a final summary of lessons, learned workshops, will be issued within three months after the end of the operation.

## Administration and Finance

The financial management strategy will continue to focus on the following:

- Staff made available to work on specific aspects of the operation.
- Compliance with reporting guidelines and constant monitoring of both allocated budget and implementation level.
- Guidance to sectoral coordinators on the correct use of funds and other resources allocated to the action plan.

## C. Detailed Operational Plan

	<p><b>Shelter</b>  <b>People reached:</b> 3,675  Male: 2,166  Female: 1,461  Other: 48</p>	
<p><b>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</b></p>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
# of persons provided with emergency shelter items, materials and/or tools to have a space that meets the minimum living conditions	8,000 <sup>16</sup>	3,675
<p><b>Output 1.1: Shelter and settlements and basic household items assistance is provided to the affected persons</b></p>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
# of persons provided with household items (at least one item)	8,000	3,675
<p><b>Progress towards outcomes:</b>  The PRCS aims to provide safe and dignified spaces to migrating populations who reach ERMs. With this objective in mind, improvements to temporary installations have been undertaken.</p>		

<sup>16</sup> Increased from 6,000 to 8,000.

Designated waiting areas in all ERMs are overcrowded due to the increase in daily arrivals, harsh weather conditions, and general physical exhaustion of migrating populations. The PRCS has installed tarpaulins in health service areas and near water taps to provide shade and shelter from the rain. However, giving sustainable enhancements remains a significant challenge since temporary infrastructures in ERMs are rustic, if not improvised, and shift according to the flow of people.

The Lajas Blancas and Bajo Chiquito ERMs are characterized by the perpetually temporary and changing nature of their installations. The PRCS has succeeded in identifying durable and easy to re-install in a changing environment. Living areas, as well as the COVID-19 isolation ward, have been effectively fenced in. Tarpaulins have been installed in the same spaces, though shade netting has proven challenging to implement. It is also important to note that both ERMs are located in flood-prone areas, though no incidents have been reported so far.

The PRCS has distributed light blankets, as a complement to hygiene kits, in health service areas and other distributions points in ERMs. Migrating individuals and families have been observed using the blankets for various uses: in sleeping areas, to provide shade, and as clothing for infants and small children.

#### Challenges:

- Continuing to advocate for safe and dignified spaces for migrating populations.
- The harshness of the climate, which accelerates the rate of deterioration and decay of existing installations.
- Lack of buildings or longer-lasting installations in the Lajas Blancas and Bajo Chiquito ERMs, and the level of creativity required to carry out improvements.
- Accessing a variety of materials (gravel, posts, fences) to augment the safety of existing spaces.



#### Health<sup>17</sup>

**People reached:** 2,672

Male: 1,246

Female: 1,425

Other: 1

#### Outcome 2: The immediate risks to the health of the affected populations are reduced through improved access to medical treatment

Indicators:	Target	Actual
# of people reached with health activities	8,000	2,672
# of families that receive COVID-19 PPE kits	8,000	0*
# of people receiving first aid services	8,000	2,190
# of ambulances supporting the operational activities	1	1

#### Output 1.1: Improved access to health care and emergency health care for the targeted population and communities

Indicators:	Target	Actual
# of persons that receive COVID-19 PPE kits	6,500	0*

#### Output 3: The psychosocial impacts of the emergency are lessened

Indicators:	Target	Actual
# of people reached with psychosocial support	1,000	0*

<sup>17</sup> All health services included in the DREF Operation are designed to complement existing health activities and interventions currently funded by UNICEF, through a joint project initiated in May 2021. Indicators take into account individuals and families reached through all health services in the field, regardless of the source of funding, for the period of September and October 2021.

\* Progress for this indicator will be reported at the end of the operation.

### Output 3.1: Psychosocial support provided to the target population as well as to RCRC volunteers and staff

Indicators:	Target	Actual
# of people provided with PSS support	1,000	0*
# of PSS kits are procured and distributed to the targeted population	1,000	8
# of volunteers that receive PSS	100	0*

#### Progress towards outcomes:

Health services are centered on child and maternal health, pregnant and lactating women, and nutrition, but the PRCS also provides primary, immediate care in ERMs to all who require it. Health service areas are also the first contact for mental health and psychosocial support: proximity creates space for personal exchanges. Families and individuals share the hardships they experienced along the migratory route.

The health services areas are perceived mainly as safe spaces by members of the target population. Most display high levels of trust towards PRCS health personnel, who play a crucial role in providing immediate care and in completing referrals. Complementarity between PRCS health teams and partners in the field is crucial, and services were designed to ensure access to a comprehensive continuum of assistance.

The Humanitarian Service Point also provides essential frontline services. However, the focus is more decidedly put on preventing the spread of COVID-19 – an important but frequently overlooked health risk due to the acute difficulties experienced by migrating populations. There, PRCS personnel share key prevention messaging and promote safe practices for the road ahead. However, since the Ministry of Health is mostly absent from the field, access to vaccination for families and individuals remains a challenge.

Finally, the growing influx of people has generated a more significant number of high-risk health situations, which require the swift transfer of individuals to regional health centres. In that sense, the acquisition by the PRCS of an ambulance-type vehicle has made a real difference in the team's capacity to provide quality care to migrating populations.

#### Challenges:

- Develop and implement a comprehensive strategy to address the mental health and psychosocial needs of all PRCS personnel deployed in the field through a three-pronged approach:
  1. Support to the field management team in Darién (coordinator and lead roles).
  2. Support to volunteers involved in the response.
  3. Creation of interagency spaces to support all actors in the field.
- Access specialized resources, external to the response but internal to the Movement, to provide support in the field.
- Operationalize duty of care for personnel in the field by prioritizing mental health and psychosocial support to ensure the sustainability of the response.



#### Water, Sanitation and Hygiene (WASH)

**People reached:** 3,675

Male: 2,166

Female: 1,461

Other: 48

### Outcome 4: Immediate reduction in risk of waterborne and water related diseases in targeted communities

\* Progress for this indicator will be reported at the end of the operation.

Indicators:	Target	Actual																												
# of people who improve their access to safe water and hygiene	11,000 <sup>18</sup>	0*																												
<b>Output 4.1: Daily access to safe water which meets Sphere and WHO standards in terms of quantity and quality is provided to target population</b>																														
Indicators:	Target	Actual																												
# of people provided with safe water	11,000	To be reported																												
# of jerricans procured and distributed <sup>19</sup>	2,000	To be reported																												
<b>Output 4.2: Hygiene-related goods (NFIs) which meet Sphere standards and training on how to use those goods is provided to the target population</b>																														
Indicators:	Target	Actual																												
# of people who receive a personal hygiene kit	11,000	3,675																												
<b>Progress towards outcomes:</b>																														
<p>The joint PRCS – IFRC – UNICEF WASH Strategy was revised and updated in October 2021. It focuses on providing safe drinking water, distributing hygiene kits, and implementing hygiene promotion activities.</p> <p>In September 2021, the PRCS installed a water plant in the Lajas Blancas ERM to treat water from the nearby river and satisfy growing demand. The plant has since produced more than 277,000 liters of water. The pump used to filter water started to present mechanical problems in October, but these were addressed on time to minimize interruptions in water distribution. Improvements to WASH installations were also undertaken in September and October, including hand-washing stations and new water faucets in key areas. The PRCS also led a technical assessment of the SENAFRONT water filtration and storage system and issued recommendations to enhance its use.</p> <p>Meanwhile, in the San Vicente ERM, the team completed reparations on the water vat, with support from UNICEF.</p> <p>Water production in the Bajo Chiquito ERM continued to run smoothly. The system is operated by a motor pump and an electrical pump, which are both solar-powered, and allow for the distribution of more than 683,200 liters of water in September. Local WASH agents also completed repairs and essential maintenance work, installed new water faucets, and helped MSF build new latrines.</p> <p>In La Peñita, a community of 150 people, the water purification system is operated by 3 motor pumps and allowed for the distribution of more than 200,000 liters of water in September. Maintenance was also completed on the equipment to prevent deterioration.</p> <p>Over September 2021, PRCS volunteers converted 500 family kits into 2,500 individual hygiene kits due to difficulties in the procurement process. These were then distributed to families and individuals in the Lajas Blancas and San Vicente ERMs. Another 4,000 individual hygiene kits have since been delivered to the region and will be distributed over the coming weeks. Distributions have proven crucial, as most migrants reach the ERMs with very few personal possessions, much less the essentials required to ensure personal hygiene.</p>																														
<table border="1"> <thead> <tr> <th colspan="4">TOTAL INDIVIDUAL HYGIENE KITS DISTRIBUTED</th> </tr> <tr> <th>Age</th> <th>Women</th> <th>Men</th> <th>Other / Not specified</th> </tr> </thead> <tbody> <tr> <td>0 – 5 years</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>6 – 12 years</td> <td>25</td> <td>11</td> <td>2</td> </tr> <tr> <td>13 – 17 years</td> <td>50</td> <td>37</td> <td>10</td> </tr> <tr> <td>18 – 29 years</td> <td>583</td> <td>731</td> <td>18</td> </tr> <tr> <td>30 – 39 years</td> <td>647</td> <td>992</td> <td>10</td> </tr> </tbody> </table>			TOTAL INDIVIDUAL HYGIENE KITS DISTRIBUTED				Age	Women	Men	Other / Not specified	0 – 5 years	0	0	0	6 – 12 years	25	11	2	13 – 17 years	50	37	10	18 – 29 years	583	731	18	30 – 39 years	647	992	10
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<sup>18</sup> Increased from 6,000 to 11,000.

<sup>19</sup> Indicator included for this additional distribution.

40 – 49 years	139	329	4
50 – 59 years	7	49	0
60 – 69 years	3	5	0
70 and over	1	3	0
Other	6	9	4
Total per gender	1461	2166	48
<b>TOTAL</b>	<b>3675</b>		
3,132 kits were distributed in the Lajas Blancas ERM and 543 at the San Vicente ERM.			
85% (3,128) of the individual hygiene kits were distributed to Haitian nationals.			

As for hygiene promotion, activities are centered on hand-washing practices and targeted messaging through group workshops to prevent the spread of COVID-19. Lack of signage and messaging has been identified as a difficulty since newly arrived families and individuals struggle to understand the layout of ERMs. The PRCS, with support from the IFRC, has mapped water and sanitation service points in both the Lajas Blancas and San Vicente ERMs and will display simplified plans of the sites in key locations.

Finally, at the beginning of October 2021, the PRCS organized a clean-up day. Volunteers and staff supported garbage removal in the Lajas Blancas y San Vicente ERMs. At both locations, plastic tents used by the PRCS team and humanitarian partners (MSF, UNICEF, IOM, RET International) were washed; child-friendly indoor and outdoor spaces were also cleaned.

#### Challenges:

- Rise in demand for safe drinking water in all three ERMs.
- Anticipated dry season, its impacts on river water levels in the region and, by extension, on the PRCS water treatment plants.
- The levels of pollution in Darién rivers require greater use of chemicals during the treatment process, which is not sustainable in the long term.
- Delays in the procurement process and with suppliers, due to the COVID-19 context, impacted the delivery of hygiene kits in the field. The last kits were delivered the first week of October 2021.
- Limited transport options to arrange the transfer of hygiene kits from the main storage area to the ERMs for distribution.
- Limited local volunteer capacity to lead hygiene promotion activities.



#### Protection, Gender, and Inclusion

**People reached:** 1,422

Male: 769

Female: 635

Other: 18

#### Outcome 5: Communities become more peaceful, safe, and inclusive through meeting the needs and rights of the most vulnerable

Indicators:	Target	Actual
PGI Minimum Standards for Emergency Situations implemented	1	1
<b>Output 5.1: Programmes and operations ensure safe and equitable provision of basic services, considering different needs based on gender and other diversity factors</b>		
Indicators:	Target	Actual

# of staff and volunteers (disaggregated by gender and age) receiving training in PGI Minimum Standards	100	0*
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**Output 5.2.: Programmer and operations prevent and respond to sexual-and gender-based violence and other forms of violence, especially against children**

Indicators:	Target	Actual
# of people reached (disaggregated by gender and age) in protection services (key protection messages, information on referral systems)	0*	0*
# of people who received the transit kits	11,000 <sup>20</sup>	1,422

**Progress towards outcomes:**

TOTAL TRANSIT KITS DISTRIBUTED			
Age	Women	Men	Other / Not specified
0 – 5 years	8	7	0
6 – 12 years	5	2	0
13 – 17 years	15	5	2
18 – 29 years	262	236	6
30 – 39 years	285	364	6
40 – 49 years	47	125	4
50 – 59 years	8	23	0
60 – 69 years	1	4	0
70 and over	1	0	0
Other	3	3	0
Total per gender	635	769	18
<b>TOTAL</b>	<b>1422</b>		
1,127 were delivered at Lajas Blancas ERM and 195 at the San Vicente ERM.			
89% (1,264) of the transit kits were delivered to Haitian nationals.			

The PRCS PGI Officer has deployed sustained efforts to ensure PGI Minimum Standards are implemented in all response areas. Through close collaboration with sector leads to enhance existing services and by directly supporting beneficiaries in the field, the PGI Officer has contributed to the development of new reflexes and prioritization processes within the PRCS team. Active referral paths, as well as the processes required to mobilize them, have been socialized.

When in the field, the PGI Officer supports migrating populations at the Humanitarian Service Point, in the health waiting areas, during distributions, and jointly with other humanitarian partners. Materials for self-care messaging are now being finalized and include signage for identifying safe spaces.

Due to unforeseen delays in the procurement process, distributions of transit kits only began in the third week of October. The kits were well received by families and individuals, who were observed making good use of the items immediately following distribution.

The PGI Officer has also organized training on PGI Minimum Standards for volunteers and staff before the start of their activities and refresher briefings for staff already in the field. In both types of sessions, the complex protection issues specific to the Darién response are explored in more detail to ensure PRCS personnel are equipped to face challenging situations and feel empowered to request support as and when needed.

**Challenges:**

\* Progress for this indicator will be reported at the end of the operation.

<sup>20</sup> Increased from 6,000 to 11,000.

- Protection risks remain high in ERMs, where adequate lighting and security measures are lacking for migrating populations.
- Observed trends in reported protection cases speak to an overall increase in sexual violence.
- Limited capacity, through a single dedicated staff member, to address all PGI-related priorities.
- Strengthen coordination mechanisms with other actors to ensure referral paths are regularly reviewed and revitalized in the case of inactive ones.



**Migration**  
People reached: 3,713

**Outcome 6: Communities support the needs of migrants and their families and those assisting migrants at all stages of migration (origin, transit and destination)**

Indicators:	Target	Actual
# of people reached with RFL services	4,000 <sup>21</sup>	3,713

**Output 6.1: Family links are restored for people separated from, or without news of, their loved ones as a result of the disaster**

Indicators:	Target	Actual
# of resolved cases of RFL (telephone calls, family reunification, search for missing persons)	4,000	3,713
# of campaigns to promote RFL services implemented.	3	0*

**Progress towards outcomes:**

In this response, 18 volunteers from the PRCS have contributed to the provision of RFL services. These are mostly oriented towards access to connectivity: the goal is to allow migrating populations to communicate directly with family and friends abroad.

RFL services are well received among the target population, who often lack the financial resources to access connectivity by their own means. Access to free phone calls, for example, allows families and individuals to dedicate a larger part of their savings to arranging transportation to the Costa Rican border, which ultimately shortens their stay in the Darién ERMs. In the San Vicente ERM, RFL services are also complemented by a cellphone charger station, provided by the IOM.

It has been crucial for the PRCS to actively promote RFL services in the ERMs, emphasizing that it is offered free of charge. Along the migration route, people are used to all services being provided at a (sometimes steep) cost; for some, the idea that phone calls could be free was initially hard to believe.

Demand for these essential services has been growing exponentially since August 2021, in line with new arrivals.

**Challenges:**

- Deploy RFL services daily in all ERMs.
- Deploy RFL services in the Bajo Chiquito ERM, due to its very weak reception signal.

<sup>21</sup> Increased from 2,000 to 4,000 considering the extension of RCF services.

\* Progress for this indicator will be reported at the end of the operation.

## Strengthen National Society

**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 PRCS volunteers supporting the operation	27	10
<b>Output S1.1.1: National Societies have effective and motivated volunteers who are protected</b>		
# of volunteers that receive PPE and visibility for activities	50	10
# of volunteers receiving advocacy briefings	30	10
<b>Output S1.1.2: National Societies have the necessary corporate infrastructure and systems in place</b>		
# of staff hired for the operation	3	3
# of lessons learned workshop held	2	1

**S1.2: Effective and coordinated international disaster response is ensured**

**S1.2.1: Effective and respected surge capacity mechanism is maintained**

Indicators:	Target	Actual
# of volunteers and staff trained in DREF processes	50	0*
# IFRC monitoring visits	3	1

### Progress towards outcomes:

In September 2021, the PRCS organized two lessons learned workshops with support from a designated facilitator. The first workshop was attended by 15 field personnel; the second one, held in the PRCS headquarters, brought together 14 members of the national management team.

Both workshops allowed the PRCS to monitor progress against the response implementation strategy while also creating constructive exchanges within the teams.

Suggested improvements to global activities and response structure include:

- Ensure continuity of specialized services for children and women, with dedicated health staff and supplies.
- Expand first aid services.
- Plan maintenance work on water installations to ensure access to safe drinking water.
- Aim to provide safe drinking water 24 hours/day in all three ERMs.
- Implement needs-based distributions of hygiene kits.
- Focus on developing multidisciplinary PGI teams.
- Create more self-care spaces for volunteers and staff deployed in the field.
- Ensure coordination mechanisms with other field actors to prevent duplication of efforts and allow for shared growth.
- Establish coordination mechanisms with the Ministry of Public Health to strengthen health care services in ERMs.
- Organize joint monitoring visits with all Movement components (PRCS, IFRC, ICRC) to assess needs and consolidate progress.

### Challenges:

- The National Society began the work of adjusting its internal mechanisms to ensure more agile implementation of funds.
- Gaps between response needs identified in the field and their link to headquarters financial processes have been reviewed and prioritized.
- Establish and disseminate practical, user-friendly reporting tools for field teams and monitoring plans for leads to ensure the latest data inform decision-making.
- Clarify procurement processes and train personnel to use them adequately.

- Establish a detailed procurement schedule to minimize delays in getting NFIs delivered to the field and subsequently distributed to migrating populations.

## D. Budget

See [Annex](#) for the updated budget.

### Reference documents

Click here for:

- [DREF Plan of Action \(EPoA\)](#)

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

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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

## MDRPA015 - PANAMA - POPULATION MOVEMENT

11/11/2021

### Budget by Resource

Budget Group	Budget
Shelter - Transitional	10,000
Construction Materials	2,000
Clothing & Textiles	38,000
Water, Sanitation & Hygiene	165,750
Medical & First Aid	47,552
Teaching Materials	31,900
Utensils & Tools	5,000
<b>Relief items, Construction, Supplies</b>	<b>300,202</b>
Storage	11,000
Transport & Vehicles Costs	32,850
Logistics Services	16,000
<b>Logistics, Transport &amp; Storage</b>	<b>59,850</b>
International Staff	32,000
National Society Staff	10,500
Volunteers	23,845
<b>Personnel</b>	<b>66,345</b>
Workshops & Training	10,000
<b>Workshops &amp; Training</b>	<b>10,000</b>
Travel	7,500
Information & Public Relations	3,200
Office Costs	3,000
Communications	1,350
Financial Charges	600
<b>General Expenditure</b>	<b>15,650</b>
<b>DIRECT COSTS</b>	<b>452,047</b>
<b>INDIRECT COSTS</b>	<b>29,383</b>
<b>TOTAL BUDGET</b>	<b>481,430</b>

### Budget by Area of Intervention

AOF1	Disaster Risk Reduction	
AOF2	Shelter	53,463
AOF3	Livelihoods and Basic Needs	
AOF4	Health	80,037
AOF5	Water, Sanitation and Hygiene	109,109
AOF6	Protection, Gender and Inclusion	116,192
AOF7	Migration	7,455
SFI1	Strengthen National Societies	63,895
SFI2	Effective International Disaster Management	51,280
SFI3	Influence others as leading strategic partners	
SFI4	Ensure a strong IFRC	
<b>TOTAL</b>		<b>481,430</b>

