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DREF Final Report

Honduras: Fire

 International Federation
of Red Cross and Red Crescent Societies

DREF Operation	Operation N° MDRHN015
Date of issue: 1 June 2022	Glide n°: WF-2021-000154-HND
Operation start date: 10 October 2021	Operation end date: 31 January 2022
Host National Society: Honduran Red Cross (HRC)	Operation budget: 133,952 Swiss francs (CHF)
Total number of people affected: 2,500 people	Total number of people assisted: 1,075 people directly
Host National Society presence: Honduran Red Cross' (HRC) organizational structure is divided into four regions, along with a Management Group at the national level and 4,700 volunteers. The National Society is represented in 52 municipalities across the country through its network of branches.	
Red Cross Red Crescent Movement partners actively involved in the operation: International Federation of Red Cross and Red Crescent Societies (IFRC).	
Other partner organizations actively involved in the operation: Bay Islands Conservation Association (BICA), Mennonite Social Action Commission (CASM), Municipality of Guanaja, and Ministry of Health (MoH).	
The Honduran Red Cross spent a total of 112,425 CHF. The remaining balance of 21,527 CHF will be returned 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 HRC, would like to extend thanks to all for their generous contributions.</i>	

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A. Situation analysis

Description of the disaster

Guanaja is part of the Islas de la Bahía department, the farthest island from the mainland. Covering a total of 55.4 km², it is home to approximately 5,300 people, most of whom (63 per cent) live in Cayo Bonacca, where most economic activities are conducted (town hall, markets, banks, etc.)

On the night of 2 October 2021, a large-scale fire consumed all 215 homes in Cayo Bonacca. Considering the event's dire nature, the HRC team was deployed to provide humanitarian actions in conjunction with other organizations, perform a damage assessment, and register the affected families.



Relaxation technique during a self-care session Source: Honduran Red Cross (HRC), 19 December 2021.

On 3 November 2021, the DREF operation technical team (coordinator, technician and administrative assistant) travelled to Guanaja to hold working meetings with municipal authorities and other organizations, aiding affected families to organize joint actions and thus avoid duplicating efforts. The team visited ground zero to see the magnitude of the damage caused by the fire and to hear what the families who were tearing down and cleaning what remained of their homes had to say. People expressed feelings of sadness, insecurity, stress and frustration because of the losses suffered, but mostly helplessness because of the disastrous circumstances they were experiencing after so many years of work and effort to build their homes. Families expressed their pain for having lost their homes for the second and third time because of previous fires.

Most affected families are still waiting for the government to rebuild their homes; however, families with the financial resources to do so are already rebuilding. Some have received support in the form of building materials (wood, blocks and cement) from the mayor's office and the private sector. Several organizations, such as Adventist Development and Relief Agency (ADRA) and CASM Menonita, provided cash assistance to affected families. The Honduran Private Sector Council (COHEP) provided food kits and hygiene kits and delivered industrial stoves, refrigerators and tools to merchants who lost their businesses to reactivate some livelihoods.

Guanaja's affected population expressed feeling very pleased with the aid that has arrived, stating that they have not felt alone during or after the tragedy. They hope that their homes can be rebuilt to achieve a new normal and once again feel safe and comfortable. After the situation evolved, families wanted to return to their homes, as they currently live in temporary housing that does not meet minimum standards or with friends or relatives. Some of these homes lack electricity and running water. The Municipality has set up community taps from which people can obtain drinking water and bring it home in small containers. To make up for the lack of electricity, they use kerosene gas lamps to light their homes at night and use butane gas stoves for cooking.



Ground zero in Guanaja. Source: Honduran Red Cross (HRC), 31 January 2022.

Honduras Strategic Investment (INVEST-H, in Spanish) personnel have finished clearing the fire site, tearing down and removing debris, and levelling land in preparation for the new houses to be built. In the meantime, this site is currently being used by children and young people as a soccer field. Families are waiting for a positive response from the new government regarding the reconstruction.

Summary of response

Overview of Host National Society

The main activities carried out to date by the National Society are:

- Mobilized 35 staff and volunteers.
- Conducted a damage assessment and needs analysis (DANA).
- Organized a campaign to collect food and household items (HHI) in La Ceiba and other cities, channelled through humanitarian collection centres.
- Organized a donation mobilization campaign.
- Identified affected families.
- Monitored the emergency's evolution.
- Liaised with local, municipal and health authorities.
- Recruited personnel to conduct post-emergency actions in the field (Coordinator, technician and administrative assistant).
- Cleansed and entered the list of affected people into the ODK platform.

- Delivered community first aid training to volunteers from Guanaja.
- Delivered training on COVID-19 and Dengue vector control to health committee members and community volunteers.
- Delivered training in basic psychosocial support (PSS) to community volunteers from Guanaja.
- Carried out PSS sessions with children and adults.
- Supported health promotion activities (malaria testing and installation of mosquito nets).
- Carried out vector control (fumigation), as well as health prevention sessions intended to educate the population regarding Dengue and COVID-19 issues and cleaning beaches.
- Carried out self-care sessions with the operation's technical team and with inter-institutional personnel who assisted the affected population during and after the fire.
- Organized health fairs in Cayo Bonacca to treat the general public.
- Delivered kitchen kits and tools to families affected by the fire.
- Delivered first aid kits to institutions trained in community first aid.
- Delivered cash and voucher assistance (CVA) to 215 families affected by the fire.
- Provided medical equipment, office supplies and biosafety material to the Cayo Bonacca Health Centre.
- Held a lesson learned and accountability workshop with key actors from the institutions involved during the implementation of DREF activities.
- Conducted a beneficiary satisfaction survey.

An HRC team was deployed to Guanaja to carry out field visits and coordinate with government entities in the area responsible for overseeing the situation, such as COPECO, the Ministry of Health, the Air Force, the Mayor's Office, and the Governor's Office. The HRC staff split into two teams - one conducted the database survey of affected families while the other quickly scoped out the affected area.

As a counterpart, Honduran Red Cross launched a fundraising campaign with support from Emisoras Unidas. Many Hondurans made cash donations to assist the families affected by the fire. The funds raised were used to increase the number of families assisted via the CVA- 75 additional families were able to receive multipurpose cash assistance.

The Honduran Red Cross played an essential role in the humanitarian aid actions carried out in Cayo Bonacca, identifying the families and providing technical support to other agencies and institutions while delivering all humanitarian assistance on the island.



HRC assists COHEP during humanitarian aid delivery. Source: Honduran Red Cross (HRC), 20 December 2021.



HRC assists the CODEM during humanitarian aid delivery. Source: Honduran Red Cross (HRC), 4 February 2022.

Overview of Red Cross Red Crescent Movement Actions

Several Partner National Societies (PNSs) provided bilateral support to Honduran Red Cross, including the Swiss Red Cross, Spanish Red Cross, Norwegian Red Cross, Italian Red Cross, and the German Red Cross, which provided technical support for the CVA. In addition, HRC implemented multilateral cooperation funds through the IFRC. Furthermore, the IFRC Country Cluster Delegation for Central America is based in Honduras.

The IFRC Livelihoods Cluster Focal Point provided technical support in preparing and reviewing the market feasibility study for the CVA. The HRC also received technical support from all areas at IFRC's Americas Regional Office in Panama, which guides and supports all countries' actions based on their needs and requirements. Also present in the country is a delegation from the International Committee of the Red Cross (ICRC). The ICRC offered to assist when emergency needs worsened on the island.

Overview of non-RCRC actors' actions

Municipal- and national-level actions greatly benefitted the families affected by the fire. In October, the NGO ADRA, provided a one-off cash disbursement to all affected families to meet their most basic need.

In November 2021, CASM Menonita provided a USD 150 check and a hygiene kit to affected families. Three psychologists came to Cayo Bonacca to provide basic PSS training to community volunteers in conjunction with Honduran Red Cross psychologists and volunteers. PSS continued to be provided to focus groups on days humanitarian aid was delivered. The Municipality of Guanaja, with support from the private sector, provided building materials to homeowners affected by the fire.

In December 2021, COHEP delivered a 115-pound food kit and a family hygiene kit, as well as industrial stoves, ovens, refrigerators, and tools, to merchants who lost their equipment to the fire. This activity was carried out with support from the Honduran Red Cross and the Municipality of Guanaja.

Churches played a significant role in supporting affected families and delivering food rations and clothing to children and adults.

Needs analysis and scenario planning

Needs analysis

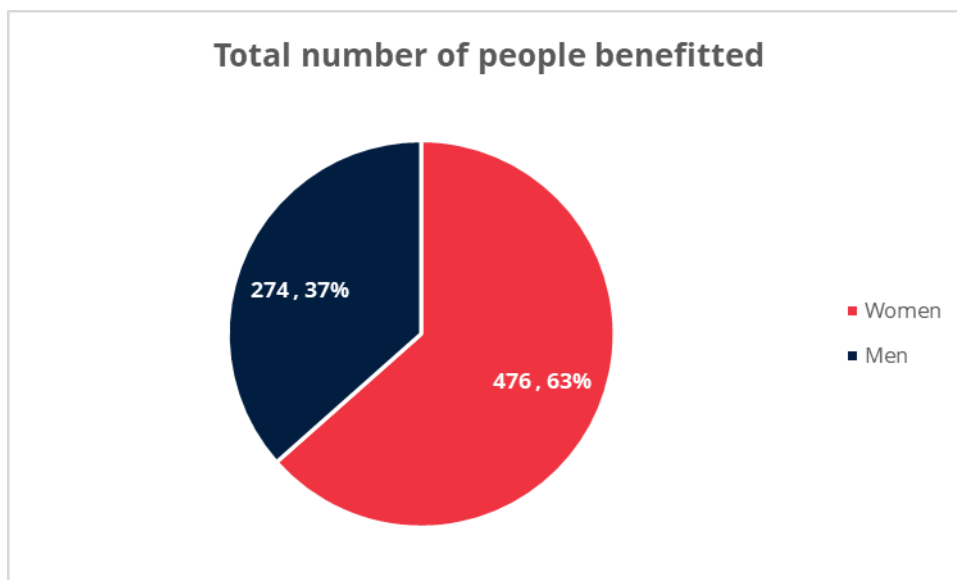
The HRC team in charge of the DREF operation met several times with Municipal Emergency Committee (CODEM) members and health personnel to understand the affected families' situation; to find out whether some families had left the cay; focusing on both basic and physical and mental health needs; and to coordinate actions aimed at alleviating families' suffering stemming from the loss of their homes and/or their sources of income.

During the first weeks after the fire, the HRC found out that some families had been forced to leave the island because they had lost their homes and livelihoods. Moreover, many families had to temporarily separate, as the number of houses that remained standing was not enough to meet the demand for housing of affected families, forcing some members to move to nearby cities such as Roatán and La Ceiba. The affected individuals who remained on the island were taken in by family and friends, managing to live on the in-kind and cash assistance that had been provided in the previous months.

The problems identified continued to be the population's loss of homes and livelihoods, as the area burned was part of the main commercial and economic centre of the municipality. The main economic activities in the sector are mainly small-scale merchants, restaurants, workshops and stores that sell household products, all of which reported total losses of both inventory and premises.

The municipality and the entire Department of Islas de la Bahía were among the regions with the lowest number of infections and deaths due to COVID-19. However, a spike in COVID-19 rates has recently been detected (November and December 2021, January and February 2022) that has overwhelmed the health centre's capacity. Medical attention, in general, has been affected, considering that the municipality only has one health centre, and people requiring more specialized services must travel to La Ceiba or Roatán. In addition, the economic impact of the pandemic has, in turn, had a significant impact on the population, as the town mostly relies on tourism. Businesses such as hotels, restaurants, transportation and others have seen a drastic reduction in revenue. They have been forced to lay off staff, a situation that undoubtedly affects the population's ability to deal with the emergency stemming from the fire.

The graph and table below summarize the people reached by cash assistance, kitchen kits and tools:



A total of 750 individuals were reached (476 women and 274 men).

Category	Estimated % of people reached ¹
Families with children under 12 months	2%
Families with children (1-6 years)	9%
Women who are pregnant	1%
Adults	52%
People over 65	20%
People with disabilities	4%
People with chronic illnesses	12%

Out of 750 individuals reached, 15 were families with children <12 months-old; 67 were families with children 1-6 years-old; 11 were women who were pregnant; 150 were > 65; 30 had disabilities; and 95 suffered from chronic illnesses.

Operation Risk Assessment

This DREF Operation and its operational strategy considered the risks related to the current COVID-19 pandemic and is aligned with the IFRC Global Emergency Appeal that assists National Societies in providing assistance and support to communities affected or at risk of being affected by the COVID-19 pandemic. According to the Ministry of Health information for Guanaja, COVID-19 infections have increased significantly since 27 January 2022, and the number of people vaccinated (first and second doses) is low compared to the total population. During the entire duration of the operation in Guanaja, HRC worked on raising the population's awareness of the importance of getting vaccinated and immunizing the population.

In addition to the low number of people vaccinated on the island, most of the population does not follow biosafety measures and that the constant influx of tourists has contributed to the spread of COVID-19.

DREF activities include health fairs and vaccination days, as well as the distribution of flyers containing key information on COVID-19 to residents during vector control sessions in the municipality and providing COVID-19-

related educational material for children and adolescents during PSS sessions. In all activities held in the municipality, emphasis is placed on the importance of wearing a face mask, applying gel and maintaining social distancing to prevent the spread of COVID-19.

B. Operational strategy

Proposed strategy

The actions were coordinated with the Municipality of Guanaja, CODEM and MoH representatives and the Honduran Red Cross.

The process of identifying and selecting the families that would receive the CVA, shelter toolkits, and kitchen sets involved municipal authorities; representatives from the CODEM, churches and the education sector; and Ministry of Health personnel and community leaders to create a database. The community was included in the process to assure transparency and support and thus reaching the families most in need.

Training on community first aid, basic PSS and vector control were provided to involve municipal staff, health personnel and community leaders in DREF activities. This allowed multiplying the knowledge acquired during training and empowered and enabled these individuals to provide first aid care during an emergency. They were also provided with first aid kits to have the necessary basic equipment to provide such care.

Communications

Considering the situation that many families in Guanaja were experiencing after the fire, constant communication was maintained through municipal and health authorities and community leaders to inform the population of the actions that would be carried out. A telephone number was published on posters that people could call with questions, doubts and comments regarding the aid provided. These posters also publicized the services being offered together with the Cayo Bonacca health centre. Municipal authorities allowed the operation's technical team to set up the DREF operations centre within municipal library premises.

The HRC's Communications Unit covered and disseminated the main actions carried out during the operation, producing digital content for dissemination over institutional media such as social networks, internal newsletters, audio-visual material, etc. During the final stage of the operation, the HRC's Communication and Image team travelled to Guanaja to cover some activities, record some testimonials from the families affected by the fire three months on and hear their views about the support they received from Honduran Red Cross.

Community Engagement and Accountability (CEA)

The CEA approach is cross-cutting and applied in activities implemented in different intervention strategies. The proposed activities included establishing two-way conversations with the community and community structures to assist with beneficiary identification and loss assessment; promoting physical and mental health during and after the emergency through social communication media, small group sessions and newsletters; and establishing a mechanism to address complaints, queries and recommendations after the emergency.

The CEA approach was essential to the CVA delivery process. It made the population aware of selection criteria and accountability mechanisms and allowed getting feedback from people reached regarding their effectiveness and use. Key people in Guanaja institutions were involved.

Vulnerable groups


Social inclusion is a fundamental part of the Honduran Red Cross, focusing on the principles of humanity and universality. It is essential to address health and PSS issues with the elderly, pregnant women, people with disabilities and members of the LGBTQ+ community. After investigating the types of population found on the island, PSS training and sessions were carried out with vulnerable groups.

Planning, monitoring, evaluation and reporting

The National Society's Monitoring, Evaluation and Reporting (MER) unit carried out oversight and follow-up actions. Said unit conducted a verification visit to the field in the first weeks of January 2022 and held a meeting in Tegucigalpa to measure indicators, outcomes, outputs and activities at the end of the project. This staff was also responsible for conducting the satisfaction survey after the cash assistance and the shelter toolkits and kitchen sets were delivered.

The last activity of the DREF operation on the island was a lesson learned workshop with key actors in Guanaja institutions, community volunteers and people reached to contribute to future operations.. The objective was to hear, through a presentation and group session, the views, assessments and recommendations of all parties involved in implementing the operation.

C. Detailed Operational Plan

	<p>Shelter</p> <p>People reached: 1,075</p> <p>Male: 387</p> <p>Female: 688</p>	
<p>Shelter 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</p>		
<p>Indicators:</p>	<p>Target</p>	<p>Actual</p>
<p><i># of people provided with emergency shelter and settlement assistance</i></p>	<p>700</p>	<p>1,075</p>
<p>Shelter Output 1.1: Shelter and settlements and basic household items assistance is provided to the affected families.</p>		
<p>Indicators:</p>	<p>Target</p>	<p>Actual</p>
<p><i># of households provided with emergency shelter assistance (kitchen sets, shelter toolkits and tarpaulins)</i></p>	<p>140</p>	<p>215</p>
<p>Narrative description of achievements</p>		
<p>The first step following the needs assessment and the identification of families to be assisted was entering the 215 families reached into the ODK platform, disaggregating the information by men, women, children, women who were pregnant, individuals over 65 years of age, people with disabilities and people with chronic illnesses. Considering fire department recommendations not to donate flammable materials, the tarpaulins were eliminated, and the number of kitchen sets and shelter toolkits was increased to 175. HRC contributed 40 prepositioned kitchen sets, providing one to all 215 families identified (1,075 people). As for the shelter toolkits, these were only distributed to 175 families, as 40 families were on COHEP's list and received a toolkit for cleaning and construction.</p>		



Delivery of kitchen sets and shelter toolkits to affected families. Source: Honduran Red Cross (HRC), 17 January 2022

Challenges

Duplication of aid to the same family. Such cases were identified and removed from the database with assistance from CODEM and MoH representatives and community leaders, leaving just one representative per family.

Making timely and orderly deliveries was a challenge because of the logistical challenges involved in transporting the kits to Guanaja. These were finally transported after negotiations with the few cargo companies available, ultimately reaching even more island families.

There were only 175 shelter toolkits to benefit 215 families in the database. Families who had received kits from the private sector were identified thanks to joint work with other organizations, which allowed serving other families.

Lessons learned

Community volunteers trained to work with the technical team enabled organized and transparent deliveries and reached the families most in need.

Streamlining HRC supplier payment procedures is important for future operations considering the DREF's short timeframe. Emergency project procedures should be given higher priority.



Livelihoods and Basic Needs

People reached: 750

Male: 274

Female: 476

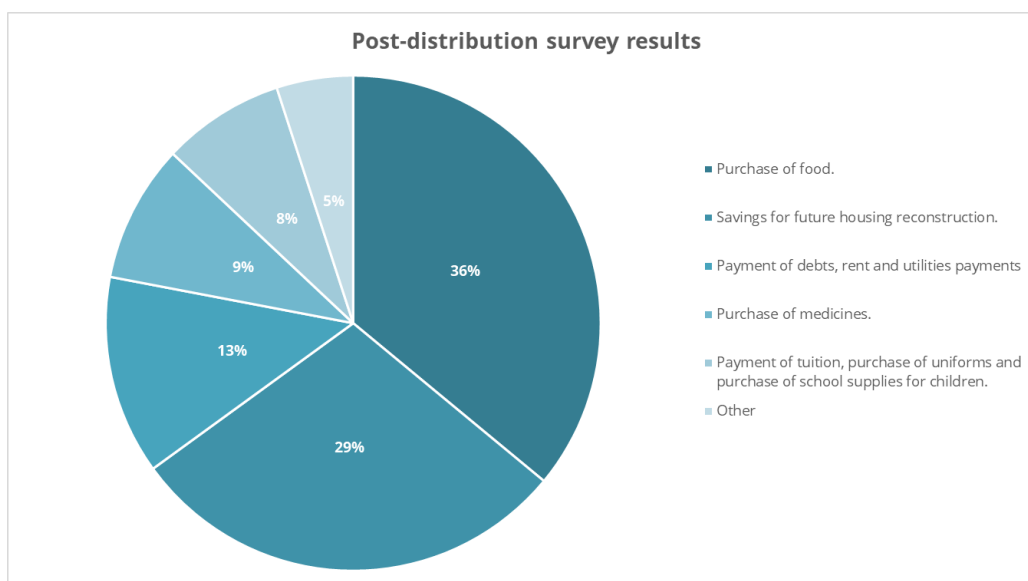
Livelihoods and Basic Needs Output 1.5: Households receive unrestricted/multipurpose cash assistance to support meet their basic needs

Indicators:	Target	Actual
# of targeted households have enough food, cash or incomes to meet their survival threshold	140	150

Narrative description of achievements

The first step was identifying and registering the 150 families targeted with IFRC funds to provide them with a check for HNL 9,500.00 (initially, 140 families were to be assisted with an HNL 10,500 check, but after the feasibility study, it was decided to decrease the amount to 9,500 to include 10 additional families). Also, after the fire, the Honduran Red Cross, with support from Emisoras Unidas, conducted a fundraising campaign via national bank accounts. This enabled adding 65 families, managing to reach all 215 families affected by the fire. Out of these 65 families, 37 received a check for HNL 9,500.00 and 28 families whose representative did not have personal ID received the same amount via a debit card. The purpose of multipurpose cash assistance

is to allow families to cover their basic needs, including housing or health needs. After the delivery, a satisfaction survey was applied to 58 families to understand their views regarding the delivery process, the means used, and what they spent the money on. The main answers were:



CVA delivery to affected families in Guanaja. Source: Honduran Red Cross (HRC), 29 January 2022.

Challenges

One of the challenges identified was the duplication of aid to the same family from several actors. Such cases were identified and removed from the database with assistance from CODEM and MoH representatives and community leaders, leaving just one representative per family

Another challenge was delivering the CVA within the stipulated timeframe because of setbacks such as the lack of financial providers and issues of mobilization outside the island.

Lastly, given the nature of the event, 30 per cent of heads of households had lost all their official identification documents. This was compounded by the National Registry of Persons' process to issue new ID documents that came into force in January 2022, which meant that the old ID documents were no longer accepted at bank branches.

Lessons learned

Having mixed CVA delivery mechanisms to achieve effectiveness in complex contexts. In this operation, a mixed strategy was used, including checks and debit cards.

A telephone line was made available for beneficiary queries, follow-up, and suggestions and to publicize selection criteria for the CVA and other services provided by the operation. This proved to be necessary, and it is considered a good practice for future operations.

Coordination with local authorities and other organizations is crucial on the island to space and plan distribution times, so families could remain covered with humanitarian assistance during the first three months.



Health

People reached: 741

Male: 267

Female: 474

Health Outcome 2: Immediate health risks to affected populations are reduced by improved access to medical treatment

Indicators:	Target	Actual
# of people who received health services	700	741

Health Output 2.1: Increased access to medical care and emergency health care for the target population and communities.

Indicators:	Target	Actual
# of first aid kits delivered	5	10

Health Outcome 4: Disease transmission from a possible epidemic is reduced

Indicators:	Target	Actual
# of people reached by vector control and hygiene promotion campaigns	700	741

Health Output 4.1: The target population is offered disease control and health promotion at the community level

Indicators:	Target	Actual
# of days of vector control and promotion of hygiene carried out	5	5
# of community health committees formed and trained	1	1

Health Outcome 6: The psychosocial impact of the emergency decreases

Indicators:	Target	Actual
# of people reached with PSS activities	300	441

Health Output 6.1: Psychosocial support provided to the target population, as well as to volunteers and staff of the CR/MLR

Indicators:	Target	Actual
# PSS session for HRC staff, volunteers and inter-agency response teams	1	1

Narrative description of achievements

Health Outcome 2: Immediate health risks to affected populations are reduced by improved access to medical treatment

Activities carried out:

Community First Aid training: given the importance of empowering people and acquiring necessary knowledge to provide first-aid care in a future emergency, training in community first aid was provided to 30 municipal staff through theoretical and practical activities.

Delivery of first aid kits to build first response capacity among Guanaja residents in an emergency. After receiving first aid training, a first aid kit was provided to institutions, to strengthen the institution and leave installed capacities. Kits were delivered as follows:

- 2 to Health Centre in Bonacca
- 1 to Health Centre in Savanah

- 1 to Municipal Emergency Committee
- 1 to the Adventist Church in Guanaja
- 1 to the Baptist Church in Guanaja
- 1 to the Cristóbal Colón School
- 1 to the Emma Romero Education Centre
- 1 to the Honduran National Police
- 1 to the Honduran Naval Base

HRC was able to double the number of first-aid kits for institutions because of the money it saved on the shelter toolkit. This made it possible to provide first aid kits to the Police, the Naval Base, and the churches.



Community First Aid training. Source: Honduran Red Cross (HRC), 9 November 2021.



Delivery of first aid kits to institutions in Guanaja. Source: Honduran Red Cross (HRC), 27 January 2022

Health Outcome 4: Disease transmission from a possible epidemic is reduced

Activities carried out:

Support to the health centre with health promotion: Two days of testing to detect malaria and to install mosquito nets were carried out in the community of Savannah in Guanaja because of the large number of pests prior to fumigation sessions; in addition, support with influenza vaccination was provided. A day of accompaniment was also held to share information on health care for diabetics and pregnant women.

Vector control and health promotion sessions regarding Dengue and COVID-19: Five fumigation sessions were conducted with support from community volunteers, health volunteers and the Naval Base. During fumigations, families were provided key information on dengue prevention actions and educational material on ways to reduce or eliminate vector-borne diseases. This was accompanied by informational posters placed at key points throughout the municipality.



Installing mosquito nets in the community of Savannah. Source: Honduran Red Cross (HRC), 30 November 2021.



Volunteer and collaborating staff who conducted fumigation sessions. Source: Honduran Red Cross (HRC), 2 December 2021.



Education on Dengue and COVID-19 issues to Guanaja residents. Source: Honduran Red Cross (HRC), 2 December 2021



Fumigation session in Guanaja. Source: Honduran Red Cross (HRC), 11 December 2021.

Education and training to the Guanaja Health Committee: The Cayo Bonacca Health Committee was formed with leaders from the Municipality of Guanaja, who received training on vector control, Dengue and COVID-19. The information they received will be vital for monitoring the population's health and will help them to make arrangements for and address any health needs that may arise. 30 people in total were trained (21 women and 9 men).

Health Fair in Cayo Bonacca: Two health fairs were held to provide health care to the population affected by the fire. Services provided included medical care, dental care, application of COVID-19 vaccine, checking of vital signs, provision of vitamins to children and adults, malaria testing, COVID-19 testing, PSS activities with children and adolescents, among others. A total of 179 people were assisted (125 women and 54 men).



Training on vector control, Dengue and COVID-19 to Health Committee. Source: Honduran Red Cross (HRC), 8 November 2021



Provision of COVID-19 vaccination services to Guanaja residents. Source: Honduran Red Cross (HRC), 23 December 2021



Provision of medical care to Guanaja residents. Source: Honduran Red Cross (HRC), 23 December 2021



Provision of dental care to Guanaja residents during Health Fair.
Source: Honduran Red Cross (HRC), 27 January 2022.



Provision of PSS care to Guanaja residents during Health Fair.
Source: Honduran Red Cross (HRC), 27 January 2022.

Health Outcome 6: The psychosocial impact of the emergency decreases

Activities carried out:

Basic PSS training for community volunteers: 16 community volunteers (10 women and 6 men) received training on basic psychosocial support, crises, crisis intervention and psychological first aid. Training included both theoretical and practical activities.

Psychosocial support sessions were held with children, adolescents, adults and people with disabilities, aiming to mitigate the consequences caused by the fire considering the sadness, insecurity and mourning for the loss being experienced by families. They worked on issues such as anxiety, sadness, mourning, stress and coping skills (always reinforcing COVID-19 prevention measures), creating a space for emotional relief and providing residents with tools that will be very useful to them in moments to cope with great stress and anxiety. Working through play activities and games, they were told of the importance of being resilient and being able to face the situations that arise. Participation was encouraged by offering prizes for both children and adults. The sessions were attended by 83 boys, 110 girls, 74 men and 174 women, for a total of 441 PSS treatments delivered.



Basic PSS training to community volunteers from Guanaja. Source: Honduran Red Cross (HRC), 12 November 2021.



PSS sessions with children, adolescents, and adults in Guanaja. Source: Honduran Red Cross (HRC), November 2021-January 2022.

Self-care sessions with inter-institutional personnel from Guanaja and the Operation's technical team. Given the importance of caring for caregivers, two self-care sessions were held for personnel involved in assisting the people affected by the fire in Cayo Bonacca (21 people in total, 17 women and 4 men). Attendees participated in emotional release and recreational activities, taking advantage of the space to talk about their emotions and the situations and experience lived. They were provided recreational spaces and relaxation techniques that allowed creating an atmosphere of peace and tranquillity for participants.



Group photo of participants in the self-care sessions.
Source: Honduran Red Cross (HRC), 19 December 2021

Challenges

Throughout all activities, Cayo Bonacca residents were encouraged to use biosafety measures to prevent COVID-19 and ensure they got the COVID-19 vaccine, always emphasizing the importance of taking all self-care measures. Through health fairs, COVID-19 vaccine awareness was shared so all residents could have easy and safe access to vaccines, getting people to get the first and second doses and the booster.

The technical team was infected with COVID-19, which limited the actions yet to be conducted. This required trained personnel to travel to the island to continue with activities and be able to leave on time.

After the first interviews with families, it was observed that many were experiencing stress, sleep issues, mourning, anxiety, and frustration. This made it vital for the operation to work on the mental health of the affected families. Many families refused to attend PSS activities. However, they were enticed to do so with prizes. HRC also took advantage of kitchen sets and shelter toolkits deliveries to hold PSS activities with families. This was very successful. After this, PSS activities with families increased considerably. Children and adolescents readily accepted all PSS activities, but getting adults to attend mental health services required more significant effort and strategies.

Lessons learned

Involving the institutions in the target area is essential to achieving project objectives. The operation worked in partnership with the Ministry of Health, the CODEM, the Municipality and other organizations. HRC's leadership stood out in all processes carried out on the Island.

Not many families attended the first health fair due to the conditions of the location and the lack of communication with community leaders. For the second health fair, the chosen site met primary conditions to provide care. The fair was publicized four days before by handing out flyers and posters and posting them on community leaders' social networks. Therefore, it will always be important to involve all organizations and community leaders to achieve successful activities.

Campaigns focusing on caring for one's mental health should be considered for future operations so that people are not so reluctant to attend health facilities.

Strategies for Implementation

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

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

Indicators:	Target	Actual
# of HRC personnel and volunteer provided with individual PPE	30	34

Narrative description of achievements

Three HRC volunteers were deployed to Guanaja to carry out PSS activities. HRC worked with 31 community volunteers and provided PPE to 34 volunteers. Before all activities, volunteers were briefed on their roles, the risks they faced, how to reduce said risks, and how to reinforce biosafety measures.

One person was hired as an operation coordinator, one as a technical engineer and one as an administrative assistant. They remained for the whole operation and even stayed for two extra weeks as volunteers.

Lessons learned workshop. The primary purpose was to understand the views of the key community actors involved in implementing all DREF activities and thus identify the aspects that were done well and those that need to be improved.



Lessons learned workshop. Source: Honduran Red Cross (HRC), 31 January 2022

Challenges

The distance between the affected communities was considerable. Transport professional volunteers specializing in community health and PSS were included, considering the island context, the fact that there is no HRC branch there, and that the volunteers would have to carry out 30-day internships without being able to travel home.

Mobilizing resources and logistics was a greater challenge than expected compared to assistance during other emergencies provided on the mainland. Mobilizations took twice as long and involved greater planning and financial cost.

Lessons learned

After this emergency on the Island of Guanaja - the first conducted in this specific context - HRC has acquired a greater understanding regarding managing advance teams, virtual management tables and financial procedures with a limited number of finance providers.

After this operation, HRC has explored another branch of logistics - sea transport, as several shipments of humanitarian aid were required.

The island context facilitated coordinating actions with other humanitarian actors present on the ground, as well as with government ministries and local authorities.

D. Financial report

See Annex for the [Financial Report](#).

Contact Information

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

Selected Parameters			
Reporting Timeframe	2021/10-2022/04	Operation	MDRHN015
Budget Timeframe	2021/10-2022/01	Budget	APPROVED

FINAL FINANCIAL REPORT

Prepared on 17/May/2022

All figures are in Swiss Francs (CHF)

MDRHN015 - Honduras - Fire

Operating Timeframe: 10 Oct 2021 to 31 Jan 2022

I. Summary

Opening Balance	0
Funds & Other Income	133,952
DREF Allocations	133,952
Expenditure	-112,425
Closing Balance	21,527

II. Expenditure by planned operations / enabling approaches

Description	Budget	Expenditure	Variance
PO01 - Shelter and Basic Household Items	17,594	13,592	4,002
PO02 - Livelihoods			0
PO03 - Multi-purpose Cash	62,792	58,379	4,413
PO04 - Health	22,512	18,880	3,632
PO05 - Water, Sanitation & Hygiene			0
PO06 - Protection, Gender and Inclusion			0
PO07 - Education			0
PO08 - Migration			0
PO09 - Risk Reduction, Climate Adaptation and Recovery			0
PO10 - Community Engagement and Accountability			0
PO11 - Environmental Sustainability			0
Planned Operations Total	102,898	90,851	12,047
EA01 - Coordination and Partnerships			0
EA02 - Secretariat Services	7,189	916	6,273
EA03 - National Society Strengthening	23,865	20,658	3,207
Enabling Approaches Total	31,054	21,573	9,481
Grand Total	133,952	112,425	21,527

DREF Operation

Selected Parameters			
Reporting Timeframe	2021/10-2022/04	Operation	MDRHN015
Budget Timeframe	2021/10-2022/01	Budget	APPROVED

FINAL FINANCIAL REPORT

Prepared on 17/May/2022

All figures are in Swiss Francs (CHF)

MDRHN015 - Honduras - Fire

Operating Timeframe: 10 Oct 2021 to 31 Jan 2022

III. Expenditure by budget category & group

Description	Budget	Expenditure	Variance
Relief items, Construction, Supplies	85,155	76,999	8,155
Shelter - Relief	8,260	5,101	3,159
Water, Sanitation & Hygiene	1,894	603	1,291
Medical & First Aid	1,879	3,982	-2,104
Teaching Materials	13,482	8,157	5,325
Utensils & Tools	3,080	4,391	-1,311
Cash Disbursement	56,560	54,765	1,795
Logistics, Transport & Storage	7,452	3,605	3,847
Distribution & Monitoring	4,180	2,414	1,766
Transport & Vehicles Costs	2,272	355	1,917
Logistics Services	1,000	835	165
Personnel	21,955	21,366	589
National Staff		425	-425
National Society Staff	18,546	20,040	-1,494
Volunteers	3,409	901	2,507
Consultants & Professional Fees	500		500
Consultants	500		500
Workshops & Training	1,500	415	1,085
Workshops & Training	1,500	415	1,085
General Expenditure	9,215	3,178	6,037
Travel	3,000		3,000
Information & Public Relations	1,768	1,170	598
Office Costs	829	413	416
Communications	1,539	1,667	-128
Financial Charges	2,079	-73	2,152
Indirect Costs	8,175	6,862	1,314
Programme & Services Support Recover	8,175	6,862	1,314
Grand Total	133,952	112,425	21,527