

Emergency Appeal No: MDR43008 Emergency appeal launched: 29 July 2022 Operation Strategy published: 2 September 2022	Glide No: N/A
Date of issue: 15 May 2024	Timeframe covered: 29 July 2022 to 31 December 2023
Operation timeframe: 17 months (5 months no-cost extension)	Number of people targeted: 210,000
Funding requirements (CHF): IFRC Secretariat funding requirement: 18 million CHF Federation-wide funding requirements: 28 million CHF	DREF amount initially allocated: CHF 1,000,000



Migrants in transit waiting to receive assistance at one of the Humanitarian Service Points (HSP) of the Honduran Red Cross in July 2023. Source: IFRC.

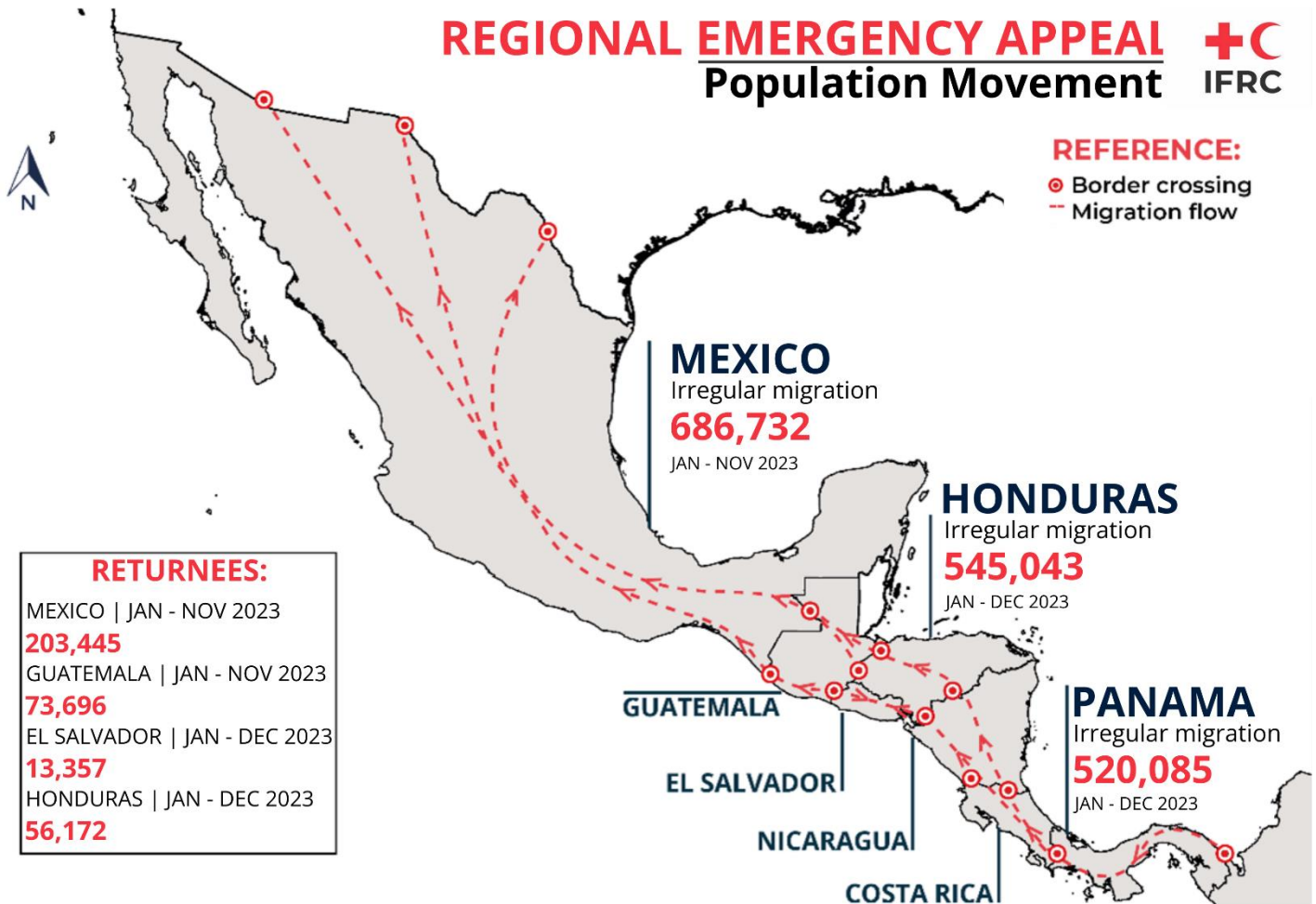
An Emergency Appeal (EA) for **18 million CHF** ([MDR43008](#)) was launched on 29 July 2022 aimed to increase the reach of the Red Cross Societies of Panama, Costa Rica, Honduras, El Salvador, Guatemala, and Mexico to scale up assistance to 210,000 people to provide humanitarian assistance and protection to people on the move along migratory routes, including through more effective preparedness and responses, strengthened capacities, and risk reduction.

The EA was launched as a trigger to facilitate immediate actions to address the humanitarian needs of migrants, returnees, and host communities. It was launched under the Global Program to address the significant increase on people in transit and returnees throughout Central America and Mexico. A total of 2,350,453 Swiss francs (13% coverage of the Appeal) was received from different donors (see [Donor Response](#)), including 1,010,229 CHF corresponding to the DREF loan. The IFRC, on behalf of the Mexican Red Cross, Guatemalan Red Cross, Honduran Red Cross, Salvadorean Red Cross, Costa Rican Red Cross, and Red Cross Society of Panama would like to extend many thanks to all partners and donors for their generous contributions.

A. SITUATION ANALYSIS

Description of the crisis

The Americas region is home to complex and mixed migration, which takes place both within and beyond the region. Many migrants¹, refugees, and returnees move through irregular pathways driven by persecution, violence, disasters, or a desire for better opportunities. Central America has become, in recent years, one of the busiest transit routes to the United States.



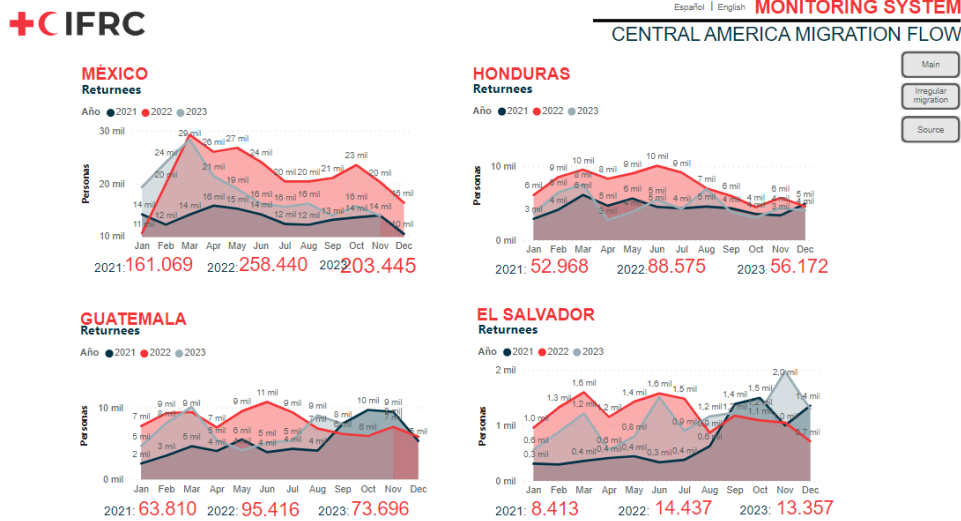
The maps used do not imply the expression of any opinion on the part of the International Federation of the Red Cross and Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities. Data Source: government data sources, R4V, NSs, OIM, IFRC. Developed by IFRC Central America Country Cluster IM Team. March 2024.

Map 1. Regional Emergency Appeal – Population Movement. Source: IFRC

Unlike the 1990s, when migration was predominantly of Central American nationalities and there was a trend of south-to-north movement, migrants now come from multiple regions and continents. Many of them, of diverse nationalities, use Panama as their first point of passage to the United States and Mexico.

¹ In accordance with the IFRC's 2009 Policy on Migration, 'migrants' are persons who leave or flee their habitual residence to go to new places – usually abroad – to seek opportunities or safer and better prospects. This includes migrant workers, stateless migrants, migrants deemed irregular by public authorities as well as asylum seekers and refugees.

Mixed migration flows have generated a variety of groups and profiles of migrants moving through Central America by different routes and at different stages of the journey within the same region. In addition, the Americas have experienced new patterns of internal displacement, motivated by conflict and different types of disasters². Economic factors, labour, insecurity (especially notable in Ecuador and Haiti), and political issues are the main reasons for migration in the region.



Graph 1. Central America Migration Flows. Source: [IFRC Dashboard](#)

The year 2023 was distinguished by a remarkable migratory mobility in the Americas, marked by a prevalence of regular over irregular movements and a growing demand for protection, integration, and regularization policies. Although the increase in mobility from Central American and Caribbean countries, especially from Haiti, has been influenced by the increase in violence and insecurity, as well as by the effects of adverse weather events and the scarcity of economic opportunities, the migration flow in 2023 was dominated mainly by migrants from Venezuela and Ecuador³. According to Panamanian authorities, throughout 2023,

520,085 irregular migrants crossed the Darien province, including 328,650 Venezuelans and 57,250 Ecuadorians, among others⁴.

In the same year, 1,148 cases of migrants were reported dead or missing in the region, tragedies linked to the lack of safe and legal routes for migration. The main causes of these incidents included drowning, transport accidents, extreme environmental conditions, and inadequate accommodation, with almost half of the victims being adult males⁵.

In addition, 2023 saw an increase in restrictions on human mobility in the Americas. At the same time, policies focused on managing migration in a regular and safe manner were developed, with the aim of strengthening its contribution to sustainable development. The United States resumed deportations of irregular Venezuelan migrants and Peru passed a law to expel irregular migrants within 48 hours. Panama announced the implementation of stricter controls and a recent decree in Ecuador authorized police to carry out street controls, imposing fines on irregular migrants as justification for their deportation. In addition, Mexico and Chile have reinforced and militarized their borders, evidencing a varied approach to migration management in the region. On the other hand, policies were promoted to facilitate regularization and safe transit, highlighting the expansion of temporary regularization opportunities for Venezuelans in Ecuador in May 2023 and the agreements between Panama and Costa Rica to expedite the registered transit of migrants from the Darien Province.

² [DMC/NRC - Global Report on Internal Displacement 2023.](#)

³ [IOM - Migration Trends in the Americas \(October-December 2023\).](#)

⁴ [National Migration Service of Panama - Irregular traffic on the Panama-Colombia border during 2023.](#)

⁵ [IOM - Registered Missing Migrants in the Americas 2023.](#)

Summary of response

Overview of the host National Society and ongoing response



Migrants assisted by Panamanian and Honduran Red Cross personnel. July 2023. Source: IFRC.

Throughout this Appeal, the National Societies involved carried out a series of strategic actions aimed at providing support and relief to migrants. The focus was on providing essential **humanitarian assistance, promoting the dignity of the people on the move, and working with host communities to address emerging needs**. Below is a summary of the main actions undertaken by each National Society:

Panama: The Red Cross Society of Panama (RCSP) focused on the provision of health services, Restoring Family Links (RFL), safe referrals with humanitarian actors on the field such as the Norwegian Refugee Council (NRC), RET International, Pan American Development Foundation (PADF), International Organization for Migration (IOM), United Nations Children's Fund (UNICEF), among others, production of drinking water, maternal and childcare, socialization of self-care messages, and distribution of hygiene kits, including differentiated kits by gender and age, mainly for women. Also, throughout the Appeal, the RCSP implemented mechanisms related to Community Engagement and Accountability (CEA). These actions were carried out based on the most latent needs of the migrant population. At the same time, thanks to the financial and technical support of bilateral partners, the RCSP was able to maintain and cover the main needs of the displaced population as well as co-leading the protection subgroup in the last months of 2023.

Costa Rica: The Costa Rican Red Cross (CRC) focused its actions on providing first aid assistance, distributing hygiene kits, providing Restoring Family Links (RFL) services, cleaning days in border areas and some host communities, implementing actions related to Community Engagement and Accountability (CEA) with the migrant population and host communities to collect feedback and suggestions on the services received, distributing food kits, socializing key messages related to health and hygiene and interpretation services, mainly in Spanish, French and English.

Honduras: The Honduran Red Cross (HRC) focused on coordinating the humanitarian response between the different humanitarian actors present in the southeastern border and another in the western zone to join efforts and complement the humanitarian response. The HRC also provided humanitarian assistance through support to temporary collective centres, provision of containers for solid waste, conditioning of the water system, Restoring Family Links (RFL) services, pre-hospital care and Mental Health and Psychosocial Support in Emergencies (MHPSS).

El Salvador: The Salvadorean Red Cross (SRC) focused on providing humanitarian assistance through protection services, psychosocial care, durable solutions (creation of forms of subsistence and employment) to migrants and/or displaced persons or victims of other situations of violence such as gender-based violence, domestic violence, sexual violence, and social violence due to abuse of power by state agents under a state of emergency. It has also distributed specialized hygiene kits, clothing, and psychosocial support. The SRC also provided specialized attention to migrant

children through actions such as the provision of rest areas, food, hydration, medical care, differentiated personal hygiene supplies and play materials.

At the same time, SRC also coordinated with other governmental and non-governmental institutions so that migrants could access medical services, purchase medicines, sexual and reproductive health services, legal advice on migration and durable solutions (sustainable reintegration, local integration, and relocation/resettlement).

Guatemala: The Guatemalan Red Cross (GRC) focused its intervention on pre-hospital care, distribution of drinking water, psychosocial support, distribution of snacks, safe referrals, delivery of hygiene kits differentiated by sex and age, distribution of orientation maps, Restoring Family Links (RFL) services and actions related to Community Engagement and Accountability (CEA) such as satisfaction surveys on services received, suggestion boxes to collect comments and/or recommendations, community consultations with host communities, etc. The GRC also implemented actions related to institutional strengthening through training and/or updating of staff and volunteers on various topics to ensure quality humanitarian aid.

Mexico: The Mexican Red Cross (MRC) focused its intervention on pre-hospital care, distribution of differentiated hygiene kits, psychosocial support, distribution of drinking water, Restoring Family Links (RFL) services, socialization of key messages related to health, self-care, hygiene, and protection. Also, distribution of the map of Mexico and the main points of care.

The National Red Cross Societies developed several tools and actions that allowed them to provide humanitarian assistance and guarantee their rights and dignity along the migratory route. Many of the actions were carried out through the Humanitarian Service Points (HSPs), which are a flagship model of the IFRC to provide assistance and protection to people on the move, regardless of their status, so that they can access essential services that would otherwise be inaccessible to them. HSPs can include fixed or mobile modalities and are placed in strategic locations along migratory routes.

Needs analysis

National Red Cross Societies, through various mechanisms of direct consultation with migrants, as well as meetings with host communities, partner organizations and key stakeholders, identified the following needs on which the actions developed were based:



Staff and volunteers from the Red Cross Societies of El Salvador, Costa Rica and Panama interview migrants and host communities to learn first-hand about their immediate needs. September 2022 and June 2023. Source: IFRC - CRC.

Panama: In view of the exponential increase in the flow of migrants, a comprehensive needs analysis was conducted by the Red Cross Society of Panama, revealing significant challenges in key areas of humanitarian care. In the area of health, the imperative need to ensure adequate medical care was identified, including the constant provision of essential medicines and medical supplies, as well as an increase in specialized personnel and the creation of adequately equipped spaces to respond to the growing demand for services. Regarding Water, Sanitation and Hygiene (WASH), the importance of expanding infrastructure to meet growing needs was highlighted, which implies

improving access to hygiene kits, increasing shower and toilet facilities, and having more qualified personnel. In the area of Protection, Gender, and Inclusion (PGI), the urgency of improving signage in temporary shelters and increasing psychosocial support and safe referrals, as well as expanding Restoring Family Links (RFL) services was highlighted. Community Engagement and Accountability (CEA) demands more surveys to understand and address urgent needs, which requires additional electronic devices. The need to strengthen interventions with host communities and ensure safe mobilization of staff and volunteers, manage safe spaces for aid storage and reinforce security measures was emphasized.

Costa Rica: In the country, the absence of authorized migration stations or centres to accommodate the significant influx of migrants across the southern border poses critical challenges. Many migrants face loss of belongings, disconnection from their families, and increased risk of exploitation, stigmatization, and human trafficking. Addressing these vulnerabilities requires comprehensive humanitarian assistance, tailored to both immediate needs and those arising from changing situations.

Among the main needs expressed by migrants are economic assistance through cash transfers, access to clear and reliable information on safe migratory routes, provision of food, access to safe drinking water, distribution of hygiene items that respond to various needs, and comprehensive protection measures. This comprehensive protection framework should include the identification and safe referral of people in precarious situations and the provision of temporary shelters to ensure their safety and well-being. In Costa Rica, there has been a notable increase in the number of refugee applicants in recent months, which has stretched the current system to the limit of its capacity to cope with the demand. This underscores the urgent need for improved support and infrastructure to effectively meet the growing needs of migrants and refugees.

Honduras: Migrants have expressed urgent needs that encompass a broad range of essential services and support. These include verifying and confirming the identities of family members, especially for children and adolescents traveling with them, and ensuring access to health services. There's a pressing requirement for adequate nutrition, clean drinking water, sanitation and hygiene facilities, food supplies, clothing, and temporary accommodation. Comprehensive support for psycho-emotional trauma is essential, alongside robust mechanisms for the protection against, prevention of, and response to gender-based violence. Equally important is ensuring migrants have access to communication and information about safe migration routes, available services, and health advisories, including prevention measures for diseases like dengue fever.

Furthermore, recent months have seen a notable rise in the incidence of febrile illnesses among migrants, including dengue, along with infectious, gastrointestinal, and dermatological conditions. This development underscores the imperative to bolster health services provided by the Honduran Red Cross and to streamline the referral process to health centres or hospitals for migrants presenting with severe conditions that necessitate specialized medical care.

El Salvador: The Salvadorean Red Cross, through direct consultations with migrants and meetings with partner organizations, has identified a spectrum of needs across different groups. Migrants in transit need essentials such as food, hydration, rest areas, shelter, and access to cash to continue their journey. For this group, access to medical services, medicines, sexual and reproductive health services, adequate clothing and footwear, personal hygiene supplies, and family reintegration services are critical. They also need access to the Internet and telephone for communication, immigration counselling tailored to each person's legal situation, and psychosocial support to cope with the emotional stress of experiences such as the Darien crossing.

People displaced by violence urgently need emergency shelter and psychological care to address the trauma caused by gender-based, domestic, sexual, or social violence, especially given the current state of emergency in El Salvador. They also need food, hydration, clothing, footwear, personal hygiene items and cash for various necessities. Access to medical care, including sexual and reproductive health services, legal assistance for justice for rights violations, and support for livelihood protection and job training are crucial. Long-term needs include access to decent housing and education.

Returned migrants face challenges that require support in food, hydration, access to cash, livelihood strengthening, medical care, psychological support, and hygiene supplies. Training and certification programs are vital to their successful reintegration into society.

People seeking asylum, refugee status or international protection emphasize the need for durable solutions, particularly in securing their livelihoods while awaiting the resolution of their process.

Guatemala: The Guatemalan Red Cross has carried out a comprehensive needs analysis, based on the behaviour of mixed migratory flows, through the monitoring of its route teams. These teams diligently report on the various situations, conditions and needs of migrants, with the objective of providing a timely response to the essential needs identified. Prominent among these needs are access to clean water, medical services, psychosocial support, Restoring Family Links (RFL) services, safe referrals, and identification and support for unaccompanied migrant children, including hospital transfers for those with serious health problems.

The number of migrants using "unofficial" entry points continues, complicating the picture and increasing the demand for humanitarian assistance. In response, the Guatemalan Red Cross recognizes the critical need to improve inter-agency coordination of humanitarian response. This effort is particularly aimed at supporting people in transit, especially vulnerable groups that require immediate and adequate attention considering their changing needs.

In addition, it underscores the need for continuous monitoring of migration patterns and routes used. This is increasingly vital, as a substantial proportion of migrants on the move are unable to access services provided by the Guatemalan Red Cross due to the absence of nearby Humanitarian Service Points (HSP).

México: The Mexican Red Cross uses a variety of information sources, including data from the United Nations High Commissioner for Refugees (UNHCR), to accurately tailor its humanitarian assistance to the diverse needs of migrants. Significant UNHCR data highlights that more than half of the asylum applications received are due to specific protection needs, stemming from factors such as sensitive legal or physical situations, children at risk, serious medical conditions, single-parent families, and women at risk. In addition, a UNHCR survey in Tapachula, Chiapas, found a multitude of reasons for migration, including job scarcity, intimidation, violence, insecurity, and limited access to food and medical services. Migrants' needs were identified as including access to cash, shelter, legal assistance, food, and purified water.

In a complementary effort, National Society interviews with migrants in Tapachula, using the Displacement Tracking Matrix methodology, revealed drivers of migration such as rising market prices, security concerns and lack of economic opportunities. Many migrants aspire to provide better education for their children, seek better living and employment opportunities, and access medical services. To address evolving needs amid the recent increase in migration flows, the National Society introduced new needs identification and response processes. Surveys conducted in cities such as Serdán, Celaya, Palenque and Huixtla indicated a high demand for services such as medical care, first aid, Restoring Family Links (RFL) services, food, and hydration at the Humanitarian Service Points (HSP).

In addition, an assessment at the International and National Women's Shelter, Training and Empowerment House (CAFEMIN, by its acronym in Spanish) in Mexico City identified critical needs, including shortages of water and cleaning supplies, high levels of stress among migrants and staff, overcrowding, precarious sleeping conditions and food limitations.

Periodic monitoring and assessments within each National Society carried out in the context of this Emergency Appeal have identified **essential needs of the National Red Cross Society volunteers**, highlighting priority areas to improve their effectiveness and well-being. Among the needs identified, the importance of access to continuing education and training opportunities on human mobility and other relevant aspects of the Appeal is highlighted. This is key to ensure that volunteers are well equipped to provide quality information to the migrant population, host communities and immigrant centres or shelters. Mental health and psychosocial support for volunteers also emerge

as critical needs, including self-care sessions aimed at managing stress and encouraging healthy practices that positively impact both their physical and mental health. Volunteer safety is another area of urgent attention, requiring adequate personal protective equipment and life and accident insurance to provide them with a safety net against possible incidents.

Despite the various actions undertaken in the framework of this Emergency Appeal, the needs identified by National Red Cross Societies largely persist. This is partly because many of these needs are rooted in structural social factors such as poverty, conflict and social unrest, lack of quality employment opportunities, among others. In this context, it is imperative that National Societies continue their dedicated efforts to care for people on the move, adapting and expanding their programs and essential services to respond to these complex and changing needs. Close collaboration with partner organizations, including government entities, NGOs, and the private sector, remains essential to maximize the impact of interventions and promote integrated approaches that address both immediate needs and underlying challenges. Following our Strategy 2030; the National Red Cross Societies, continue their commitment to strengthening local capacities, promoting community resilience, and ensuring equitable access to essential services making sure that all people who migrate are safe, treated with dignity and treated humanely.

Operational risk assessment

During the implementation of this Emergency Appeal, continuous operational risk assessments were carried out to respond in an agile and effective manner to the dynamic and constantly changing situation of people on the move, as well as host communities. This process involved continuous and adaptive planning, based on the assessment of different possible scenarios, which enabled National Red Cross Societies to prepare to adapt their services and respond in a relevant manner to the needs of the affected populations. The constant review and prioritization of actions within operational strategies became a regular practice, given the fluidity of migratory flows and budgetary constraints.

In this context, National Societies focused their efforts on addressing mainly the most immediate needs, which meant that some actions initially foreseen in their operational strategies were impacted and could not be fully implemented. In addition, changes in the regulations of transit and destination countries led to the accumulation of migrants at borders and reception points, generating discontent, insecurity, and insufficient provision of essential services. In response, National Societies collaborated closely with other humanitarian organizations and national authorities to monitor and adapt to these changing regulations. At the IFRC level, regional teams responsible for migration and communications remained alert to any changes, sharing them effectively with National Societies through the Central America Country Cluster Delegation (CCD), thus ensuring a coordinated and efficient response.

B. OPERATIONAL ESTRATEGY

Update on the strategy

As part of the Mexico and Central America Migration Crisis Emergency Appeal, the Regional Operational Strategy aimed to support the Red Cross Societies of Panama, Costa Rica, Honduras, El Salvador, Guatemala, and Mexico to extend assistance and protection to 210,000 people along migration routes. The IFRC supported the country operations with a Regional Operation structure and expertise in Information Management and Community Engagement and Accountability (CEA) and established a regional monitoring and evaluation framework to enable a coordinated and improved response. This Operational Strategy is part of a Federation-wide approach, focusing on activities across the following priorities, with an overall focus on National Society Strengthening (NSS): (a) Implementation and management of Humanitarian Service Points (HSPs), (b) Cash and Voucher Assistance, (c) Health and WASH Assistance, (d) Protection, Gender and Inclusion (PGI), (e) Community Engagement and Accountability (CEA), f) Information Management and Digital Transformation, g) Humanitarian Diplomacy, h) Membership

Coordination, i) Communication, j) Rapid Response Capacity, k) Planning, Monitoring, Evaluation and Reporting (PMER), l) Finance and Administration, and m) Logistics.



Migrants in transit in the department of Chiquimula, Guatemala in August 2022. Source: GRC.

This operation considered the long-term impact on National Societies with a holistic approach and looked beyond the term of the long-term operational strategy towards sustainability. It also linked with current programs based on existing strategic frameworks, such as Strategy 2030, the Global Migration Strategy, and the Migration Action Plan in the Americas, reinforcing cross-border work to promote binational exchange of experiences.

The initial strategy of the Emergency Appeal had a no-cost extension of 5 months, extending its end date to 31 December 2023, to ensure the implementation of actions from new contributions received by the National Red Cross Societies of Panama, Guatemala, Honduras, and Mexico.

In addition, although fundraising reached a lower percentage than initially projected, the National Societies were able to extend humanitarian assistance to a larger number of people in mobility than initially planned. This result was possible due to efficient resource management and a constant review of operational strategies in the dynamic context of mixed migratory flows.

The National Societies also carried out frequent monitoring of the needs of the population in mobility, making it possible to identify significant changes in their conditions and requirements. This information made it necessary to make strategic adjustments, optimizing the use of available funds and prioritizing actions in sectors such as health and Water, Sanitation and Hygiene (WASH), which were in greatest demand.

C.DETAILED OPERATIONAL REPORT

STRATEGIC SECTORS OF INTERVENTION⁶



Shelter, Housing and Settlements

People reached: 22,607

Objective:	<i>Affected people strengthen their safety and well-being through shelter and settlement solutions</i>			
Key indicators:	Indicator	NS	Actual	Target
	<i># of people reached with temporary collective accommodation</i>	Costa Rica	-	300
		El Salvador	-	50
		Honduras	-	15,500
		Guatemala	4,611	2,000
	<i># of people reached with relief assistance for basic needs (hygiene, food and other essential items) in temporary collective accommodation</i>	Costa Rica	-	300
		El Salvador	-	50
		Honduras	12,488	15,500
		Guatemala	10,119	10,000
	<i># of temporary collective accommodation supported directly by National Societies</i>	Costa Rica	-	2
		Honduras	7	3
		Guatemala	37	2
		Mexico	-	1
	<i># of people trained on temporary collective accommodation issues</i>	Honduras	12	25
		Guatemala	153	30

Progress towards outcomes

The total number of people reached in this sector includes those who received direct assistance for basic needs and/or temporary collective shelter services.

⁶ The figures presented in each sector correspond to 31 December 2023.

The Red Cross National Societies of **El Salvador**, **Costa Rica** and **Mexico** did not implement actions in this sector, since, after reviewing their operational strategies due to the constant change in migratory flows and the limited availability of funds, they prioritized actions to cover the most urgent needs of the migrant population.

Honduras: The Honduran Red Cross (HRC) distributed hydration and menstrual hygiene kits at the Centre for Attention to Irregular Migrants (CAMI) in the municipality of Danlí. It also supported the rehabilitation of the water system at the Carlos Roberto Reina temporary shelter located in the municipality of Trojes to ensure that all people had access to safe water. HRC also strengthened the staff and volunteers active in the operation through training and refresher workshops on shelter issues to ensure relevant attention.

Guatemala: The Guatemalan Red Cross (GRC) provided direct support to temporary shelters through collaboration with organizations dedicated to this service. This service aimed to ensure safe spaces for those in need of shelter. In addition, the GRC extended its assistance directly to entities that provide temporary collective shelter to migrants in transit, adapting its assistance on a month-to-month basis in response to emerging needs. This support included the delivery of essential supplies such as personal and family hygiene items, clothing, and food provisions, among others.



Guatemalan Red Cross volunteers provide information on nearby temporary shelters to migrants at one of the Humanitarian Service Points (HSP). October 2022. Source: GRC.

Alto, the GRC conducted training and updating processes for staff and volunteers who directly support the care of the migrant population on issues related to route orientation, psychosocial support, livelihoods, among other topics to strengthen the quality of the service provided beyond the end of the Appeal.



Livelihoods and Basic Needs

People reached: -

Objective:	<i>Affected people restore and strengthen their livelihoods</i>			
Key indicators:	Indicator	NS	Actual	Target
	<i># of people who received food to cover their immediate food needs</i>	El Salvador	-	18,000
	<i># of people reached with actions related to entrepreneurships</i>	Honduras	-	100
		Guatemala	-	50
<i>A feasibility study conducted for the provision of seed capital to entrepreneurs (Yes/No)</i>	Guatemala	1	1	

Progress towards outcomes

The Red Cross National Societies of **El Salvador** and **Honduras** did not implement actions in this sector because, after reviewing their operational strategies due to the constant change in migratory flows and the limited availability of funds, they decided to prioritize actions to cover the most urgent needs of the migrant population.

Guatemala: In February 2023, the Guatemalan Red Cross (GRC) developed a feasibility study for the distribution of seed capital to entrepreneurs in a host community in the department of Izabal. However, the distribution of the seed capital did not materialize because the GRC had to prioritize actions due to increased migration flows and additional needs among the migrant population, as well as lack of funds.



Multi-purpose Cash

People reached: 975

Objective:

The most vulnerable people have their needs met through the use of cash.

Key indicators:	Indicator	NS	Actual	Target
		# of people reached with cash and voucher assistance	Panama	-
Costa Rica			750	1,200
El Salvador			225	625
Honduras			-	4,500
Amount of cash distributed (in CHF)		Panama	-	40,000
		Costa Rica	37,500	300,000
		El Salvador	11,250	11,250
		Honduras	-	150,000
# of volunteers and National Societies staff trained in livelihoods tools and Cash and Voucher Assistance (CVA)		Panama	-	20
		Costa Rica	11	30
A feasibility study of CVA conducted in the host community (Yes/No)		Panama	-	1
		Costa Rica	1	1
	El Salvador	1	1	
	Honduras	-	1	

Created and implemented a CEA framework for cash transfers and livelihoods

Panama

-

1

Progress towards outcomes

The Red Cross National Societies of **Panama** and **Honduras** did not implement specific actions for this sector. After reviewing their operational strategies in response to the constant change in migratory flows and the limited availability of funds, they decided to implement priority actions aimed at covering the most urgent needs of the migrant population.

Costa Rica: The Costa Rican Red Cross (CRC) conducted a feasibility study and market analysis focused on the distribution of cash assistance. This study determined that the delivery of multipurpose humanitarian aid cards was the most practical modality. Following this line, CRC acquired 150 cards, each with a value of USD 250, reaching a total of 750 migrants in transit who met the study's selection criteria. Along with the cards, informational brochures were provided detailing the amount of assistance, instructions for using the card, and contacts for inquiries.



Part of the informational brochures that the Costa Rican Red Cross provided along with the multipurpose humanitarian aid cards. October 2023. Source: CRC.

Initially, the CRC considered replacing the cards with supplies of the same monetary value due to time constraints, but after internal assessment and agreements with the issuing bank, it was concluded that it was necessary to maintain the mechanism originally identified. In addition, short training and refresher programs on Cash and Voucher Assistance (CVA) were carried out for staff and volunteers directly involved in the operation, thus ensuring that they possessed the essential knowledge to adequately guide the people assisted with this mechanism.

El Salvador: The Salvadorean Red Cross (SRC), during the initial phase of a feasibility study for the distribution of multipurpose cash, identified that migrants in transit had difficulties in withdrawing money, mainly because most of them lacked a physical personal identification document, having only a digital one not accepted by banks. In addition, restrictions arising from the state of emergency limited the distribution of cash.

Faced with these difficulties, the SRC conducted an internal assessment of the situation and opted to replace the delivery of cash with cards redeemable for food, each with a value of USD 250. The acquisition of 45 cards made it possible to reach 225 people. These cards were distributed to migrants in transit, internally displaced persons, and victims of gender-based violence, adjusting the focus of the program to respond to the specific needs identified.



Health & Care

(Mental Health and psychosocial support / Community Health / Medical Services)

People reached: 108,123

Objective:	<i>The most vulnerable people receive high quality health and care services, including MHPSS.</i>			
Key indicators:	<i>Medical Services</i>			
	Indicator	NS	Actual	Target
	<i># of people reached with targeted health services</i>	Panama	29,794	5,000
		Costa Rica	5,272	20,000
		Honduras	12,817	12,000
		Guatemala	47,889	27,700
		Mexico	1,896	750
	<i># of family first aid kits distributed</i>	Costa Rica	148	140
		Honduras	6,000	2,500
		Guatemala	26	30
	<i># of personal protection equipment (EPP) kits distributed</i>	Costa Rica	-	5,000
		Honduras	10,532	30,000
		Guatemala	10,951	10,000
		Mexico	-	22,000
	<i># of volunteers and National Society staff trained in first aid</i>	Panama	45	40
		Honduras	28	25
		Guatemala	191	100
	<i># of people transported by National Societies ambulances / medical transport to health facilities.</i>	Honduras	40	50
<i># of ambulances operated by the National Societies to provide medical transportation and pre-hospital care</i>	Panama	-	2	
	Honduras	11	1	
<i>% of migrants and people from host communities receive health sensitization.</i>	Panama	-	30%	
	Honduras	-	85%	

		Guatemala	100 %	90%
		Mexico	-	85%
<i>Community health</i>				
Indicator		NS	Actual	Target
<i># of people reached with health promotion sensitization</i>		Panama	481	1,000
		Honduras	-	12,000
		Guatemala	28,108	27,700
		Mexico	3,139	10,000
<i># of Community based health and first aid (CBHFA) volunteers supporting the operation (includes first aid trained volunteers)</i>		Panama	-	16
		Honduras	-	50
		Guatemala	265	50
		Mexico	-	10
<i># of National Societies staff and volunteers trained in CBHFA</i>		Honduras	-	25
<i># of mosquito nets distributed for vector control.</i>		Panama	-	1,000
<i>Mental health and psychosocial support (MHPSS)</i>				
Indicator		NS	Actual	Target
<i># of people reached by National Society mental health and psychosocial support services</i>		Panama	1,392	3,000
		Costa Rica	-	2,400
		El Salvador	2,162	400
		Honduras	19,867	12,000
		Guatemala	19,121	24,990
		Mexico	42	500
<i>MHPSS network on caregiver care created and formed or reinforced</i>		Honduras	1	1
<i># Number of PSS kits delivered to people affected (disaggregated by children, teenagers, and adults)</i>		El Salvador	1,318	1,200
		Guatemala	3,389	9,000

# National Societies staff and volunteers trained in MHPSS	Honduras	35	60
	Guatemala	73	50
	Mexico	43	20
# of sessions of self-care for staff and volunteers.	Costa Rica	-	5
	El Salvador	10	10
	Honduras	5	6
	Mexico	9	3

Progress towards outcomes

The total number of people reached in this sector includes those who received direct assistance to meet their health-related needs, including Mental Health and Psychosocial Support in Emergencies (MHPSS).

Panama: Faced with a steady increase in the flow of migrants, the Red Cross Society of Panama (RCSP) focused on providing basic first aid services, maternal and child health, as well as medical care in the Darien region, which includes the two Temporary Migrant Reception Stations (ETRM) of San Vicente and Lajas Blancas. Medical care was provided on a continuous basis and some recurrent illnesses were identified, including acute diarrheal diseases, lower extremity wounds, common colds, high blood pressure, diabetes mellitus, skin abscesses, acute tonsillitis, among others.



Red Cross Society of Panama medical personnel provide primary medical care to a migrant. March 2023. Source: IFRC.

In addition, cases of dehydration were detected and, in collaboration with other partners, actions were coordinated to distribute hydration kits, focusing particularly on the male population over 18 years of age, the most attended in this category. It was noted that, at the Lajas Blancas ETRM, people from the local community also sought medical attention. At the same time, Emergency Mental Health and Psychosocial Support (MHPSS) Services were provided to migrants in transit, as well as to people from the host communities who requested them. The focus was primarily on providing short, individualized interventions.

Also, as part of the initiatives to strengthen and continuously improve the RCSP, training and refresher sessions in first aid were promoted. These sessions were aimed primarily at volunteers who play a key role in direct assistance to migrants, to ensure effective and timely care. This training not only improved medical care capacity, but also instilled a sense of security and confidence in both volunteers and migrants, contributing to the creation of a more humane and safer environment for all involved.

Costa Rica: The Costa Rican Red Cross (CRC) focused on providing first aid to migrants on both the southern and northern borders of the country. The most frequent consultations included wounds, friction rashes, inflammation of the lower extremities, allergies, skin rashes, heat stroke, vomiting, diarrhea, and vital sign checks, among others. It is important to note that the CRC was unable to carry out actions related to Emergency Mental Health and Psychosocial Support (MHPSS) due to the lack of funds necessary to provide quality care.

El Salvador: The Salvadorean Red Cross (SRC) provided psychosocial care and accompaniment, implemented self-care days, and distributed differentiated psychosocial support kits for children, adolescents, and adults (composed of play materials for children and adolescents, and in the case of adults, includes a manual of mental activities, among other supplies). Individual and family care was also provided to returned and displaced migrants in their place of relocation, with the aim of contributing to the strengthening of their mental health, facilitating positive coping strategies and livelihood management. At the same time, the SRC developed self-care workshops for their staff and volunteers and staff of the Migrant Attention Management, Executive Technical Unit and Doctors of the World, who assist migrants and displaced persons.

Honduras: The Honduran Red Cross (HRC) implemented pre-hospital care and Mental Health and Psychosocial Support in Emergencies (MHPSS) services at strategic points in Danlí, Trojes, Las Manos and Ocotepeque. Although Appeal funds were not sufficient to include the purchase of medicines and supplies for pre-hospital care, through coordination with other projects, it was possible to provide complete and quality care to the population that required it. At the same time, campaigns were developed to socialize key messages related to individual and community health promotion with migrants, as well as with host communities.

In addition, self-care sessions were conducted with National Society staff and volunteers who have been directly supporting the operation, as well as other key actors in Ocotepeque, who provide assistance in the western part of the country.

Guatemala: The Guatemalan Red Cross (GRC) provided pre-hospital care services, distribution of personal protective equipment (masks, alcohol gel, etc.), socialization of awareness messages on health-related issues, mental health care and psychosocial support, and distribution of psychosocial support kits.

The GRC also conducted training/refresher training on various topics, including first aid, for individuals and volunteers working directly with the migrant population to continue to ensure the relevance and quality of the services provided. At the same time, host communities were trained in first aid, and community first aid kits were distributed.



Mexican Red Cross volunteers provide first aid to a family of migrants. August 2023. Source: MRC.

Mexico: The Mexican Red Cross (MRC) provided medical care and first aid, as well as psychosocial support services. It developed and printed an activity booklet "Emotions in route" for migrant children. The objective was to support the recognition of emotions and promote self-care and self-protection measures for children to prevent family separation.

At the same time, the MRC developed training, updating and self-care sessions with staff and volunteers of the National Society, as well as with people from governmental institutions and humanitarian organizations with whom joint actions have been developed.

Likewise, as part of the strengthening of the Humanitarian Service Points (HSP), two Mobile Medical Units were acquired and delivered to the Delegations of Tijuana, Baja California and Nogales, Sonora to assist migrants. Each unit has two consultation rooms, a reception area, and a canopy to improve waiting conditions. In this regard, the MRC expanded its basic medical assistance services and referrals to the Mexican Social Security Institute in Nogales; and in Tijuana, collaboration was achieved with the Family Medical Unit for medical assistance at the Movimiento Juventud 2000 Shelter.



Water, Sanitation and Hygiene

People reached: 129,740

Objective:

Comprehensive water, sanitation and hygiene support is provided to the most vulnerable people, resulting in an immediate reduction in the risk of water-related diseases and improving the dignity of the target population.

Key indicators:	Indicator	NS	Actual	Target
	Key indicators:	# of people reached with hygiene supplies	Costa Rica	6,905
El Salvador			1,300	3,300
Honduras			11,007	30,000
Guatemala			7,401	34,000
# of people reached with safe water		Panama	24,553	5,000
		El Salvador	15,739	19,200
		Honduras	44,797	30,000
		Guatemala	37,746	2,500
# of personal hygiene kits distributed		Panama	4,910	1,500
		Costa Rica	6,905	15,000
		El Salvador	1,300	4,000
		Honduras	12,258	30,000
		Guatemala	7,333	34,000
# of liters of drinking water distributed through safe water supply		Panama	19,951,700	1,500,000
		Honduras	1,593,368	30,000
# of people reached by WASH assistance (vector control, hygiene promotion, solid waste management)		Panama	-	1,500
	Honduras	6	8 ⁷	

Progress towards outcomes

Comprehensive services have been provided, so the total number of people reached in this sector includes people who received direct assistance with individual hygiene supplies or differentiated hygiene kits and/or safe water, depending on the needs required.

⁷ # of campaigns

Panama: The Red Cross Society of Panama (RCSP) provided safe water to the migrant population at the Temporary Migrant Reception Station (ETRM) in Lajas Blancas, to people in the Bajo Chiquito host community, as well as to those who were directly assisted at the Humanitarian Service Point (HSP) and to those who received specific health services at different points.

Likewise, personal hygiene kits (containing mainly toothbrush, toothpaste, shampoo, shaver, soap, etc.) were distributed, as well as differentiated hygiene kits for women. These actions were complemented with hygiene promotion educational sessions (hand washing and delivery of supplies to the authorities to support hygiene at the stations), as well as cleaning days.



Two women washing their clothes in the Bajo Chiquito camp, Darien, Panama. May 2023. Source: IFRC.

In the original strategy, the RCSP had not contemplated the distribution of hygiene items in addition to the hygiene kits differentiated by sex. However, due to blockades at the end of 2023 in all country, many migrants in transit were stranded. Faced with this situation, the National Society quickly adapted and began distributing specific hygiene items differentiated by sex and age, mainly, according to the emerging needs of the affected people.

Costa Rica: The Costa Rican Red Cross (CRC) prioritized the distribution of differentiated hygiene kits to meet one of the basic needs of migrants. This distribution was carried out at Humanitarian Service Points (HSP) strategically located at times and places that ensure access to as many people as possible.

The personnel involved in this operation maintained constant communication to provide assistance to people who encountered difficulties in reaching the HSPs, so in many cases they were mobilized as needed, either in the event of an increase or decrease in the migratory flow.

El Salvador: The Salvadorean Red Cross (SRC) distributed differentiated hygiene kits for women, pregnant women, children, and men (containing shampoo, bath soap, toothpaste, toothbrush, body lotion, toilet paper, among other supplies). Clothing kits for children from 0 to 2 years old and 3 to 8 years old were also distributed. In addition, safe water in 600 ml plastic bottles was distributed.

Honduras: The Honduran Red Cross (HRC) prioritized the distribution of differentiated hygiene kits, the distribution of safe water in the conditioning of water systems in collective centres. Material was printed with key messages on hygiene promotion and menstrual hygiene, as well as vector control campaigns and fumigation days in the different shelters.

Guatemala: The Guatemalan Red Cross (GRC) within the Humanitarian Service Points (HSP) distributed hygiene items, hygiene kits and water bottles. The National Society ensured that distributions were made in quantities and materials that were easy to transport so that they would be useful and could be used by all people.



Protection, Gender and Inclusion

People reached: 62,990

Objective:

The different people affected are safe from harm, including violence, discrimination and exclusion, and their needs and rights are met.

Key indicators:	Indicator	NS	Actual	Target
		<i># of sectoral or PGI assessments conducted using the PGI Minimum Standards</i>	Panama	-
El Salvador			1	1
Honduras			1	1
Guatemala			-	3
<i># of people reached by protection, gender and inclusion services</i>		Panama	7,159	500
		Costa Rica	-	3,200
		El Salvador	124	1,350
		Honduras	13,980	5,000
		Guatemala	39,412	2,570
		Mexico	-	10,000
<i># of people accessing safe spaces</i>		Honduras	11,885	4,000
<i>Established or updated referral pathways for response</i>		Costa Rica	-	1
		Honduras	1	1
		Mexico	0	2
<i># of National Societies staff and volunteers trained on implementing the PGI Minimum Standards</i>		Costa Rica	59	45
		Honduras	80	25
		Guatemala	366	100
<i># of volunteers and management staff trained in restoring family links (RFL)</i>		Honduras	25	25
		Mexico	182	80
<i># of people reached with RFL services</i>		Panama	8,622	3,000
		Honduras	13,586	200
	Guatemala	9,643	1,050	

	Mexico	852	500
#of humanitarian diplomacy initiatives on prevention and response to SGBV and violence against children	Honduras	2	1

Progress towards outcomes

The total number of people reached in this sector includes those who have received Protection, Gender, and Inclusion (PGI) services, as well as those who have been supported with Restoring Family Links (RFL) services.

Panama: The Red Cross Society of Panama (RCSP) disseminated key culturally sensitive messages through channels and mechanisms accessible to all people. It also made safe referrals in coordination with other organizations and government institutions.

At the same time, in connection with RFL actions, electricity generators were reinforced to ensure that all points had easy access to electricity. Likewise, migrants were supported by providing them with access to spaces to charge cell phone batteries or other items that required it, as well as access to Wi-Fi signal and, in particular cases, help in the search for people.

Costa Rica: The Costa Rican Red Cross (CRC) has a policy called "Gender equality and equity policy", which is implemented in all its actions. In this regard, CRC developed training and updating processes on issues related to the minimum standards of PGI to ensure that all staff deployed in the operation had the minimum training necessary to ensure relevant care to all people who required it.

El Salvador: The Salvadorean Red Cross (SRC) shared key messages related to PGI with people who approached the Humanitarian Service Points (HSP). The SRC also conducted a PGI rapid assessment to identify strengths and weaknesses that needed to be reinforced to ensure that all actions taken with the migrant population were relevant to their age, culture, sex, gender, etc.



Mexican Red Cross volunteer providing international call service to a migrant. March 2023. Source: MRC.

Honduras: The Honduran Red Cross (HRC), under the Appeal, conducted a PGI rapid assessment to ensure that proposed interventions respected diversity and addressed the specific needs of all vulnerable groups. This contributed to making the actions implemented more accessible and effective.

Also, the National Society participated in the protection sub-groups and worked on strengthening safe spaces and developing training processes on PGI with key actors, volunteers, and National Society staff. At the same time, it worked on planning for the development of the National Intervention Team specialized in RFL, in collaboration with other organizations that have supported HRC on this issue.

Guatemala: The Guatemalan Red Cross (GRC) implemented several actions within the Humanitarian Service Points (HSP) focused on Protection, Gender and Inclusion (PGI). These activities included informative talks and the distribution of key messages, ensuring that all services were accessible to people in need. In parallel, training and

updating processes were carried out for staff and volunteers on PGI-related topics. In addition, actions related to Restoring Family Links (RFL) were implemented, such as providing maps of the country, information on nearby points for specialized care, access to internet signal, connectivity, and calls, among others.

Mexico: The Mexican Red Cross (MRC) provided connectivity services, calls, Wi-Fi and battery charging at the different Humanitarian Service Points (HSP). It also held RFL specialization workshops in Veracruz and Mexico City to strengthen the RFL network.



Community Engagement and Accountability

People reached: 5,107⁸

Objective:	<i>The diverse needs, priorities and preferences of affected people guide the response through a people-centered approach and meaningful community involvement.</i>				
Key indicators:	Indicator	NS	Actual	Target	
	<i># of National Societies with established feedback mechanisms</i>	Panama		Yes	Yes
		Costa Rica		Yes	Yes
		Honduras		Yes	Yes
	<i># of community consultation meetings</i>	Costa Rica		3	3
		Guatemala		11	8
	<i># of satisfaction surveys completed</i>	Panama		2,317	300
		Costa Rica		19	4,000
		Honduras		125	4,000
		Guatemala		2,646	400
	<i>% of surveyed people reporting that they receive useful and actionable information through different trusted channels (broken down into digital and non-digital channels).</i>	Panama		70%	60%
		Honduras		-	75%
		Guatemala		97%	75 %
	<i>% of affected people surveyed who report that humanitarian assistance is delivered in a safe, accessible, accountable and participatory manner.</i>	Panama		70%	60%
Costa Rica			-	70%	
Honduras			-	75%	
Guatemala			97%	75 %	

⁸ The number of people reached corresponds to the total number of people to whom the surveys were applied.

# of staff, volunteers and leadership trained on CEA (disaggregated by staff / volunteers / sex)	Costa Rica	89	50
	Honduras	-	25

Progress towards outcomes

Panama: As part of its accountability mechanisms, the National Society conducted satisfaction surveys among a random sample of people who used the services offered. The results indicate that most of the population surveyed perceived that they had received high quality services that met their needs. In addition, respondents expressed additional areas of interest in which they would like to receive more information, including how to contact family members, access food and health services, primarily.

The implementation of these satisfaction surveys allowed the National Society to identify areas requiring strengthening, service expansion needs, adjustments to key messages and, ultimately, to improve communication of its role as a humanitarian actor in the field.

Costa Rica: A sensitization strategy was implemented targeting host communities, and awareness-raising talks were held for staff and volunteers on issues related to the CEA approach. Based on the information gathered in these sessions, "Pre-hospital care cards for chronically ill migrants and pregnant women" were created, in addition to generating informative content and key messages that are planned to be included in the Costa Rican information map aimed at the migrant population.



In addition to perception and satisfaction surveys, National Red Cross Societies also implemented suggestion boxes at various times at the HSP. November 2022. Source: IFRC.

The migratory flow in the last months of the 2023 generated diverse expectations and attitudes in the host communities, so the meetings with the communities were key to dialogue and resolve doubts. All this information was also used to generate an awareness-raising strategy aimed at the host communities.

Honduras: The National Society applied satisfaction surveys to women who were assisted in the shelters through the distribution of menstrual hygiene kits. Almost 100% indicated that they were satisfied with the kit and its contents. For the National Society, this was an accountability exercise that allowed it to consider replication for future distributions beyond the Appeal, since this approach will allow for a direct understanding of the advantages and disadvantages associated with the items distributed.

Guatemala: The National Society consulted with the host communities, as well as with the migrants to whom services are provided at the Humanitarian Service Points (HSP) to learn their perceptions and suggestions to strengthen and ensure the relevance and quality of the assisted provided.



Migration

People reached: 309,887 (158,535 directly and 151,352 indirectly)

Objective:

The specific vulnerabilities of migrants, refugees and returnees are analysed, and their needs and rights are met through targeted humanitarian assistance, protection and humanitarian diplomacy interventions, in coordination with relevant stakeholders and sectors.

Key indicators:	Indicator	NS	Actual	Target	
	<i># of HSPs created or reinforced</i>	Panama		2	1
		Costa Rica		4	4
		El Salvador		0	4
		Honduras		10	2
		Guatemala		9	8
		Mexico		9	6
	<i># of people reached through humanitarian service points (migrants and displaced people)</i>	Panama		3,443	2,500
		Costa Rica		24,689	20,000
		El Salvador		17,498	18,000
Honduras			71,803	30,000	
Guatemala			38,492	12,855	
Mexico			2,610	22,000	
<i># of people reached with relief kits</i>	Costa Rica		-	20,000	
	Honduras		-	6,000	
	Mexico		-	22,000	
<i># of people reached with connectivity services at HSPs</i>	Honduras		4,420	200	
	Guatemala		13,735	5,000	
<i># of people reached indirectly through the dissemination of key services and protection messages.</i>	El Salvador		2,190	4,000	
	Honduras		13,218	8,000	
	Guatemala		135,944	5,000	
<i># of staff and volunteers trained in migration and displacement</i>	Costa Rica		50	100	
	El Salvador		-	50	
	Honduras		-	25	
	Guatemala		246	50	
	Mexico		43	20	

Progress towards outcomes

Panama: The Humanitarian Service Point (HSP) located at the Temporary Migrant Reception Station (ETRM) in San Vicente, played a crucial role in assisting migrants by concentrating assistance capabilities in one location. Although this HSP has been very useful and has significantly supported the operations of the National Society, in recent months it experienced mechanical failures that at times made it unusable.

Faced with this situation and recognizing the importance of the HSP, the National Society undertook several advocacy actions. As a result of these efforts, a new HSP was acquired in May 2023 through funding from ECHO's Programmatic Partnership project. This new HSP, located at the Lajas Blancas ETRM, has helped the National Society continue to strengthen its HSP services, including those specific to this Emergency Appeal.

Costa Rica: Assistance was provided to migrants with information support and two interpreters, one at each border, allowing for better communication by providing assistance and confidence for them to approach and express their needs, so that they can be attended to or referred. They were also provided with information material on health issues and useful information during their trip.

El Salvador: The National Society directly assisted people at the Humanitarian Service Points (HSP) through psychosocial care, safe referrals, legal and migratory attention. The rest of the attention was provided indirectly through inputs provided (mainly through kits and safe water) to government entities and partner organizations, which also provide direct attention and distribution of humanitarian aid to the migrant population. Government entities and organizations include the Migrant Care Management, part of the Directorate of Migration and Foreigners; the Ministry of Foreign Affairs, which has offices that work with the migrant population; and other civil society institutions, including the Missionaries of St. Charles Scalabrinians.

Honduras: Attention and services were provided through the Humanitarian Service Points (HSP) in the municipalities of Danlí, Trojes and Ocotepeque, staffed by the National Society's technical team and trained volunteers in the different thematic areas: Camp Management (CCCM), RFL, MHPSS, Health and WASH.

Guatemala: The Guatemalan Red Cross carried out partial improvements in the Humanitarian Service Points (HSP) located at the busiest border points between Guatemala-Honduras and Guatemala-Mexico, to ensure that these spaces were dignified and safe to serve people who required the services available. The National Society carried out real-time monitoring of the migratory flow, which allowed, in many cases, the relocation of some HSPs to areas with greater demand. In the HSPs, services such as safe connectivity, distribution of protection messages adapted to the needs of the journey, personalized hygiene kits according to sex and age, first aid and psychosocial support, among others, were offered.

Mexico: As part of the strengthening of the Humanitarian Service Points (HSP), two Mobile Medical Units were acquired, which will be used as HSPs and were delivered to the delegations of Tijuana, Baja California and Nogales, Sonora to assist migrants. Each unit has two consultation rooms, a reception area and a canopy to improve waiting conditions. In the last months of the Appeal, it was possible to provide basic medical assistance and referrals to the Mexican Social Security Institute in Nogales; and in Tijuana, a collaboration was achieved with the Family Medical Unit for medical assistance at the Movimiento Juventud 2000 Shelter.

In addition, stationery supplies were provided to the HSPs in Palenque, Chiapas; Ciudad Sedán, Puebla; Celaya, Guanajuato; and Tenosique, Tabasco. As well as the resupplies of brochures with a map of Mexico, available services, and self-care messages, strengthening the services provided at the HSPs.



Two of the Humanitarian Service Points (HSPs), one in Honduras (left) and one in Mexico (right) strengthened through funding from this Appeal. April 2023. Source: HRC and MRC.

Most of the services provided were through Humanitarian Service Points (HSP), which played a crucial role as neutral, safe, and welcoming spaces, strategically located to ensure that people on the move, regardless of their migration status or location on their journey, could access a wide range of humanitarian services. Through this Emergency Appeal, new HSPs were created, as in the case of Mexico, and in the other cases, some of the National Society HSPs were fully or partially reinforced, thus expanding access to high quality services to a greater number of people.



Risk Reduction, climate adaptation and Recovery

People reached: -

Objective:	<i>Host communities in high-risk areas are prepared and able to respond to disasters</i>			
Key indicators:	Indicator	NS	Actual	Target
	<i># of host communities with early warning systems established in collaboration with RCRC</i>	Guatemala	-	1
	<i># of host communities trained in the development of early warning systems</i>	Guatemala	-	5
	<i>Awareness campaigns on risk reduction issues including translation of first aid guide in migrants' languages and host communities' languages (Yes/No)</i>	Guatemala	-	1
	<i># of people trained in disaster risk reduction-related areas (VCA)</i>	Costa Rica	-	30

Progress towards outcomes

The Red Cross National Societies of **Guatemala** and **Costa Rica** no longer developed actions in this sector, since, after reviewing their operational strategies due to the constant change in migratory flows and the limited availability of funds, they decided to prioritize actions to meet the most urgent needs of the migrant population.



Education

People reached: -

Objective:	<i>Mitigate child protection risks through the provision of essential child-centered services.</i>			
Key indicators:	Indicator	NS	Actual	Target
	<i># of affected children, adolescents and young adults receiving any form of education support provided by RCRC in affected areas</i>	Costa Rica	-	5,000
		El Salvador	-	600

Progress towards outcomes

The Red Cross National Societies of **Costa Rica** and **El Salvador** no longer developed actions in this sector, since, after reviewing their operational strategies due to the constant change in migratory flows and the limited availability of funds, they decided to prioritize actions to meet the most urgent needs of the migrant population.



Environmental sustainability

People reached: -

Objective:	<i>The environmental impact of the operation is reduced by focusing on greener practices in the supply chain and procurement of locally produced items, effective waste management and recycling, and environmental review of long-term sectoral interventions.</i>			
Key indicators:	Indicator	NS	Actual	Target
	<i># of green activities developed of environmental sustainability</i>	Costa Rica	8	10

Progress towards outcomes

Costa Rica: During the transit of the migrant population along the migratory route at both borders, a significant amount of waste was generated daily, which represented a problem for the communities due to the exponential accumulation of waste at the bus terminals. This led to the organization of several campaigns for waste collection and the promotion of environmental sustainability. These campaigns involved the active participation of volunteers from various auxiliary boards of the Costa Rican Red Cross.

At the Paso Canoas border post, the National Society coordinated with several regional sections, including Golfito, Ciudad Neily and Coto Brus, as well as the Municipality of Corredores. These entities provided a space for waste

disposal and, in collaboration with the Municipality of Golfito, personnel and a small truck were provided to collect and transport the waste to the designated collection centre.

Similar activities were also carried out at the northern border post, with the collaboration of volunteers from the San Miguel, Río Cuarto, Santa Rosa, Los Chiles, Guatuso and Gestión de Riesgo delegations, in addition to the support provided by the Regional Board of the northern zone.

The National Society paused these actions due to the increase in the migratory flow in recent months and the high demand for actions to meet the needs of the migrant population, which led to a need to prioritize in order to respond in a focused manner.

Enabling approaches



National Society Strengthening

Objective:	<i>National Societies respond effectively to the broad spectrum of evolving crises and their auxiliary role in disaster risk management is well defined and recognized.</i>				
Key indicators:	Indicator	NS	Actual	Target	
	<i># of volunteers involved in the response operation that have increased their skills in response and management of operations</i>	Panama		35	75
		Costa Rica		116	4,500
		El Salvador		30	75
		Honduras		80	100
		Guatemala		132	25
		Mexico		50	100
	<i>National Society has identified learning mechanisms to assess the impact of the operation (Yes/No)</i>	Panama		Yes	Yes
		Costa Rica		Yes	Yes
		El Salvador		Yes	Yes
Honduras			Yes	Yes	
Guatemala			Yes	Yes	
Mexico			Yes	Yes	
<i># of volunteers provided with equipment for protection, safety and support (e.g. PPE) appropriate to the emergency</i>	Costa Rica		116	4,500	
	El Salvador		30	75	
	Honduras		80	100	

<i>NS capacities strengthened to provide services to the affected population (Yes/No)</i>	Guatemala	40	25
	Mexico	50	100
	Panama	Yes	Yes
	Costa Rica	Yes	Yes
	El Salvador	Yes	Yes
	Honduras	Yes	Yes
	Guatemala	Yes	Yes
	Mexico	Yes	Yes

Progress towards outcomes

The National Societies ensured that all staff and volunteers directly participating in the Appeal had the minimum safety precautions, through the provision of personal protective equipment adapted to each context, as well as the relevant follow-up with each security point to respond in a timely manner to any incident.

In parallel, several trainings and updating processes were carried out on topics related to the sectors prioritized by each National Society within the framework of the Appeal. In addition, the National Societies ensured that all volunteers had medical and accident insurance, as an important precaution against any eventuality that might occur during the execution of humanitarian actions. Simultaneously, several self-care and psychosocial care initiatives were promoted, both at individual and group level, with the main objective of balancing the mental and physical health of volunteers, thus contributing to their overall well-being.

During June 2023, the IFRC Americas Regional Office, with the support of the Reference Centre on Institutional Disaster Preparedness (CREPD), undertook a process of updating the curriculum on sexual and gender-based violence (SGBV) to cover not only SGBV, but also sexual violence. Subsequently, in August 2023, a face-to-face workshop was held in Panama City to validate the updated curriculum with staff and volunteers from four National Societies, including those of Panama and Honduras. Part of the funding for this workshop came from this Appeal. The results were useful for the National Societies of this Appeal to start strengthening their actions related to SGBV and sexual violence.

In addition, in August 2023, a bi-national workshop was held between the National Societies of Panama and Costa Rica on the minimum standards of Protection, Gender and Inclusion (PGI) and their application in migratory contexts. Issues related to safe referrals and gender-based violence were also introduced. The workshop was carried out by the IFRC Americas Regional Office and the Central America CCD through funds from this Appeal and, in addition to the workshop, it was possible to have a pathway-based look at the care and protection of migrants in transit, which helps to have more evidence to be used by National Societies to strengthen their interventions.

Also, at the end of the Appeal, each National Society developed a lesson learned workshop to make an assessment on basic evaluation criteria in relation to the actions developed in the Appeal. This exercise provided evidence to contribute to the strengthening of the next operations, and to continue providing relevant and quality care to all migrants in need.

Due to the time extension of the Appeal, each National Society finished at different times, according to the planning of their actions, as well as the availability of funds.



Coordination and Partnerships

Objective:	<i>Expand the programmatic reach of National Societies and the International Federation to ensure a coordinated humanitarian response with other governmental and non-governmental agencies.</i>				
Indicator	NS	Actual	Target		
Key indicators:	<i>Membership coordination meetings organized, and updates are provided to the Membership partners (Yes/No)</i>	Panama	Yes	Yes	
		Costa Rica	Yes	Yes	
		El Salvador	Yes	Yes	
		Honduras	Yes	Yes	
		Guatemala	Yes	Yes	
		Mexico	Yes	Yes	
	<i>Movement coordination meetings organized, and updates are provided to the Movement partners (Yes/No)</i>	Panama	Yes	Yes	
		Costa Rica	Yes	Yes	
		El Salvador	Yes	Yes	
		Honduras	Yes	Yes	
		Guatemala	Yes	Yes	
		Mexico	Yes	Yes	
	<i>Key partners meetings organized, and updates provided to all partners (Yes/No)</i>	Panama	Yes	Yes	
		Costa Rica	Yes	Yes	
		El Salvador	Yes	Yes	
		Honduras	Yes	Yes	
		Guatemala	Yes	Yes	
		Mexico	Yes	Yes	

Progress towards outcomes

Between October and December 2022, all National Societies involved in this Appeal, in collaboration with the IFRC, carried out a needs assessment of the migrant population at the borders with Mexico and Central America. The overall objective of this assessment was to analyse the humanitarian needs, information, and access to basic services of the migrant population at key borders in Central America, with a focus on shelter, health (including

mental health), water, hygiene and sanitation, food security and protection. This assessment provided information that helped National Societies strengthen their intervention strategies and, in turn, strengthen joint work in the region.

This assessment was carried out again between November and December 2023, so that National Societies, despite the conclusion of the Appeal, would have updated information on the latest needs. In this way, they would be able to assist the migrant population from their internal structures and specific contexts.

During the implementation of the Appeal, National Societies maintained constant communication with the IFRC and the ICRC at different times to coordinate specific actions within the framework of the Appeal, as well as to carry out context, security, and humanitarian diplomacy analyses, to strengthen the actions planned by each National Society.

National Societies also established direct communication with various governmental entities, local, national, regional and international organizations to carry out context analysis, plan joint actions, join efforts and reach more migrants, in order to provide quality humanitarian assistance. All these actions will continue beyond the end of the Appeal to continue responding effectively.



Secretariat Services

Objective: *IFRC supports capacity building of National Societies and leverages the strength of the communities they work with in the most effective and efficient way possible.*

Key indicators:	Indicator	NS	Actual	Target	
		<i>Joint coordination tools and mechanisms are in use within the Membership response (Yes/No)</i>	Panama	Yes	Yes
Costa Rica			Yes	Yes	
El Salvador			Yes	Yes	
Honduras			Yes	Yes	
Guatemala			Yes	Yes	
Mexico			Yes	Yes	
<i># of surge missions or deployments</i>		Panama		1	1
		Honduras		1	2
		Guatemala		2	3
		Mexico		0	2

Progress towards outcomes

Communications

1,288 media articles have been published on the migratory crisis in Central America and Mexico between 1 August 2022 and 31 December 2023, an average of 2.4 stories per day. This is equivalent to investing \$146.396.2 million in media advertising. The coverage is mainly in Spanish and English and focuses on the route-based approach, the needs of migrants and the network of humanitarian service points. More information on the media coverage is available [here](#). 87 posts have been published on the IFRC X and Instagram accounts. On X, where the IFRC focused its content, there was an average of 1,585 impressions and 80 engagements per post. On Instagram, there was an average reach of 1,841 impressions and 159 engagements per post, and have the highest views, engagement, and impression rates. Also, an article was produced for the IFRC website on Returnee Migration in the country.

During the initial implementation phase of the Appeal, four people were deployed: one in Panama, one in Honduras and two in Guatemala, to provide support to the National Societies in the initial stages of the actions. Subsequently, and until the conclusion of the Appeal, no more people were deployed. Coordination and follow-up with the National Societies was carried out through the staff of the IFRC Central America Country Cluster Delegation.

D. FUNDING

As per the final financial report attached, this operation closed with a balance of 89,892 CHF. The IFRC seeks approval from its donors to reallocate this balance to PCR507 MAACR002 Secretariat Service Strengthening to support to the National Societies of Central America. Partners/donors who have any questions in regards to this balance are kindly requested to contact the Head of Central America Country Cluster Delegation, Nelson Aly Rodríguez (nelson.alyrodriguez@ifrc.org), within 30 days of publication of this final report. Pass this date the reallocation will be processed as indicated.

Federation-wide funding requirement*

<p style="text-align: center;">Federation Wide Funding Requirement including the National Society domestic target, IFRC Secretariat and the Partner National Society funding requirement</p> <p style="text-align: center;">28 million CHF</p>	<p style="text-align: center;">IFRC Secretarian Funding Requirement in support of the Federation Wide funding ask</p> <p style="text-align: center;">18 million CHF</p>
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*For more information on Federation-Wide funding requirement, refer to section: Federation-wide Approach in the Regional Operational Strategy.

Breakdown of the IFRC secretariat funding requirements



OPERATING STRATEGY

MDR43008 – Mexico & Central America:
Migration crisis

FUNDING REQUIREMENTS

Planned Operations	12,119,346
Shelter and Basic Household Items	321,308
Livelihoods	611,031
Multi-purpose Cash	845,013
Health	2,096,713
Water, Sanitation & Hygiene	2,228,172
Protection, Gender and Inclusion	859,824
Community Engagement and Accountability	181,710
Education	116,856
Migration	4,643,033
Risk Reduction, Climate Adaptation and Recovery	191,586
Environmental Sustainability	24,100
Enabling Approaches	4,782,061
Coordination and Partnerships	2,381,340
Secretariat Services	29,829
National Society Strengthening	2,370,892
TOTAL FUNDING REQUIREMENTS	18,000,000

all amounts in Swiss Francs (CHF)

Contact information

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

At the Red Cross Society of Panama

- **President:** Elias Solís, elias.solis@cruzroja.org.pa
- **General Director:** Larissa Rodríguez, larissa.rodriguez@cruzroja.org.pa

At the Costa Rican Red Cross

- **President:** Dyanne Marenco González; dyanne.marenco@cruzroja.or.cr
- **General Director:** José David Ruiz; david.ruiz@cruzroja.or.cr

At the Salvadorean Red Cross

- **President:** Dr. Benjamín Ruiz Rodas; jose.ruiz@cruzrojasal.org.sv
- **General Director:** Rigoberto Hernández; rigoberto.hernandez@cruzrojasal.org.sv

At the Honduran Red Cross

- **President:** Juan José Castro; josejuan.castro@cruzroja.org.hn
- **General Director:** Alexei Castro; alexei.castro@cruzroja.org.hn

At the Guatemalan Red Cross

- **President:** Annabella Folgar; annabella.folgar@cruzroja.gt
- **General Director:** Virna Villeda; virna.villeda@cruzroja.gt

At the Mexican Red Cross

- **President:** Fernando Suinaga; presidencia@cruzrojamexicana.org.mx
- **General Director:** José Antonio Monroy; jamonroy@cruzrojamexicana.org.mx

At the IFRC Americas Regional Office

- **Head of Central America Country Cluster Delegation:** Nelson Aly Rodríguez; nelson.alyrodriguez@ifrc.org
- **Head of Health, Disasters, Climate and Crises:** Marianna Kuttothara, marianna.kuttothara@ifrc.org
- **Operations, Evolving Crises and Disasters Manager:** Maria Martha Tuna; maria.tuna@ifrc.org
- **Head of Strategic Partnerships and Resource Mobilisation:** Monica Portillo; monica.portillo@ifrc.org
- **Communications Manager:** Susana Arroyo, susana.arroyo@ifrc.org
- **Head of PMER and Quality Assurance:** Golda Ibarra; golda.ibarra@ifrc.org
- **Regional Head, Global Humanitarian Services and Supply Chain Management:** José Fernando Giraldo, jose.giraldo@ifrc.org

In the IFRC Geneva Headquarters

- **DREF Senior Officer:** Eszter Matyeka; email: eszter.matyeka@ifrc.org
- **Operations Coordination Focal Point:** Antoine Belair; email: karla.morizzo@ifrc.org

Reference documents



Click here for:

- [Link to the Emergency Appeal and updates](#)

How we work

All IFRC assistance seeks to adhere the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief, the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable, to **Principles of Humanitarian Action** and **IFRC policies and procedures**. 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.

Emergency Appeal

FINAL FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2022/7-2024/3	Operation	MDR43008
Budget Timeframe	2022/7-2023/12	Budget	APPROVED

Prepared on 29 Abr 2024

All figures are in Swiss Francs (CHF)

MDR43008 - Central America & Mexico - Migration Crisis

Operating Timeframe: 29 jul 2022 to 31 dic 2023; appeal launch date: 29 jul 2022

I. Emergency Appeal Funding Requirements

Thematic Area Code	Requirements CHF
AOF1 - Disaster risk reduction	188.000
AOF2 - Shelter	343.000
AOF3 - Livelihoods and basic needs	1.381.000
AOF4 - Health	2.375.000
AOF5 - Water, sanitation and hygiene	2.373.000
AOF6 - Protection, Gender & Inclusion	1.204.000
AOF7 - Migration	5.407.000
SFI1 - Strengthen National Societies	3.290.000
SFI2 - Effective international disaster management	1.000
SFI3 - Influence others as leading strategic partners	190.000
SFI4 - Ensure a strong IFRC	1.248.000
Total Funding Requirements	18.000.000
Donor Response* as per 29 abr 2024	1.340.224
Appeal Coverage	7,45%

II. IFRC Operating Budget Implementation

Thematic Area Code	Budget	Expenditure	Variance
AOF1 - Disaster risk reduction	12.060	3.995	8.065
AOF2 - Shelter	43.798	39.475	4.323
AOF3 - Livelihoods and basic needs	58.506	12.872	45.634
AOF4 - Health	394.337	401.163	-6.826
AOF5 - Water, sanitation and hygiene	405.427	414.193	-8.767
AOF6 - Protection, Gender & Inclusion	251.442	239.543	11.899
AOF7 - Migration	577.053	594.234	-17.181
SFI1 - Strengthen National Societies	312.153	318.153	-6.000
SFI2 - Effective international disaster management	84.255	60.948	23.307
SFI3 - Influence others as leading strategic partners	0	0	0
SFI4 - Ensure a strong IFRC	194.860	175.984	18.876
Grand Total	2.333.891	2.260.560	73.331

III. Operating Movement & Closing Balance per 2024/03

Opening Balance	0
Income (includes outstanding DREF Loan per IV.)	2.350.453
Expenditure	-2.260.560
Closing Balance	89.892
Deferred Income	0
Funds Available	89.892

IV. DREF Loan

* not included in Donor Response	Loan :	1.060.229	Reimbursed :	50.000	Outstanding :	1.010.229
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Emergency Appeal

FINAL FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2022/7-2024/3	Operation	MDR43008
Budget Timeframe	2022/7-2023/12	Budget	APPROVED

Prepared on 29 Apr 2024

All figures are in Swiss Francs (CHF)

MDR43008 - Central America & Mexico - Migration Crisis

Operating Timeframe: 29 jul 2022 to 31 dic 2023; appeal launch date: 29 jul 2022

V. Contributions by Donor and Other Income

Opening Balance							0
Income Type	Cash	InKind Goods	InKind Personnel	Other Income	TOTAL	Deferred Income	
British Red Cross	198.435				198.435		
DREF Response Pillar				1.010.229	1.010.229		
Japanese Red Cross Society	33.642				33.642		
On Line donations	391				391		
Red Cross of Monaco	19.770				19.770		
Simón Bolívar Foundation/CITGO	225.386				225.386		
Swedish Red Cross	263.137				263.137		
Swiss Red Cross	100.000				100.000		
The Canadian Red Cross Society	143.595				143.595		
The Netherlands Red Cross (from Netherlands Govern	258.067				258.067		
UNICEF - United Nations Children's Fund	97.800				97.800		
Total Contributions and Other Income	1.340.224	0	0	1.010.229	2.350.453	0	
Total Income and Deferred Income					2.350.453	0	