

<b>Emergency Appeal №: MDR43008</b> <b>Emergency appeal launched:</b> 29 July 2022 <b>Operation Strategy published:</b> 2 September 2022	<b>Glide №:</b> N/A
<b>Operation Update № 6</b> <b>Date of issue:</b> 18/10/2023	<b>Timeframe covered by this update:</b> 29 July 2022 to 31 August 2023
<b>Operation timeframe:</b> 17 months 29 July 2022 to 31 December 2023	<b>Number of people to be assisted:</b> 210,000
<b>Financial requirements (CHF):</b> IFRC Secretariat funding requirement: 18 million CHF Federation-wide funding requirements: 28 million CHF	<b>DREF amount initially allocated:</b> CHF 1,000,000

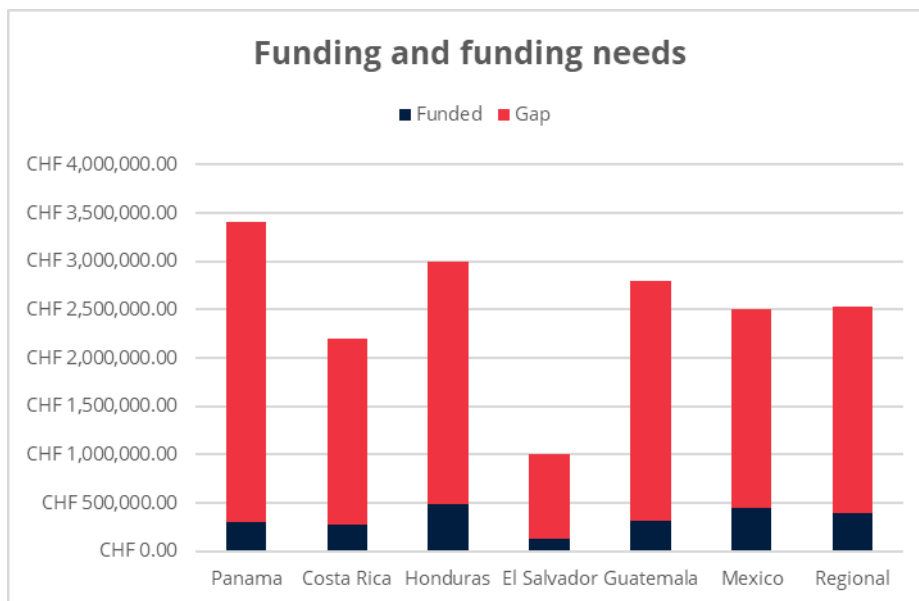
To date, this Emergency Appeal, which seeks 18 million CHF, is **13 per cent funded**. Further funding contributions are needed to enable the National Societies in the region, with the support of the IFRC, to continue preparedness efforts and provide humanitarian assistance and protection to people on the move. Click [here](#) for the donor response.



Migrants line up to be transferred in canoes to the Temporary Migratory Reception Station (ETRM) of Lajas Blancas, in the indigenous town of Bajo Chiquito (Panama). Source: EFE/Bienvenido Velasco.

An Emergency Appeal (EA) for **18 million CHF** ([MDR43008](#)) was launched on 29 July 2022 with the aim of increasing the reach of the Red Cross Societies of Panama, Costa Rica, Honduras, El Salvador, Guatemala, and Mexico. The Appeal aims to scale up assistance to 210,000 people, providing humanitarian assistance and protection to people on the move along migratory routes, including through more effective preparedness and response, 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. As 31 August 2023, the appeal [coverage](#) is 13%, equivalent to 2,293,368 CHF, taking into account 1,010,229 CHF corresponding to the DREF loan.



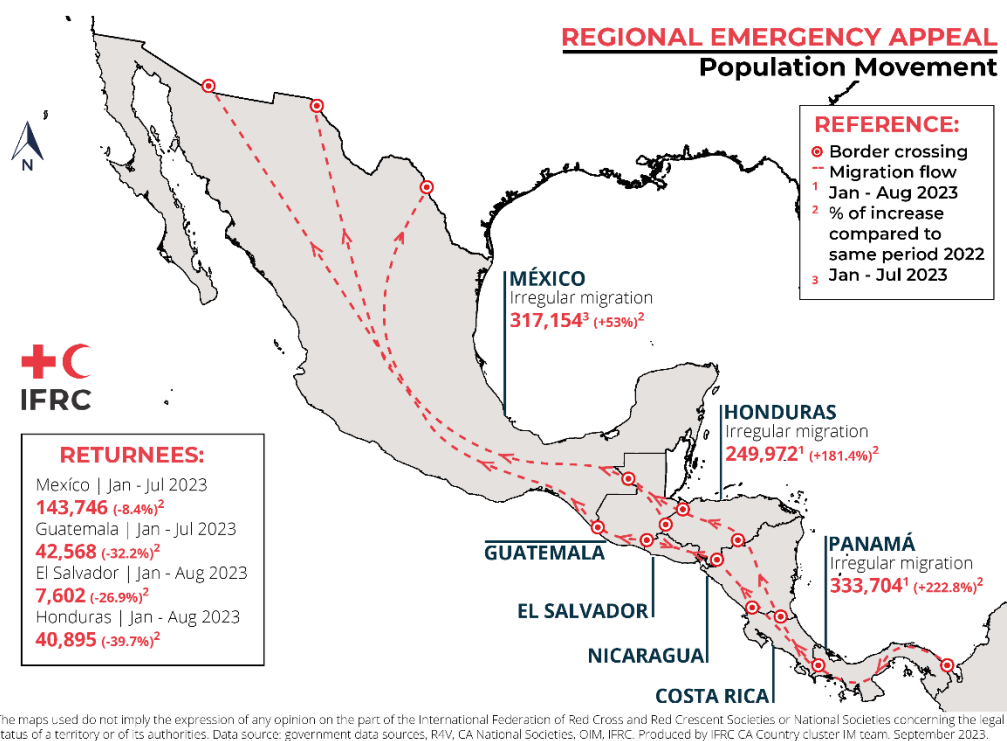
This operation update documents the first 12 months of the operation, which has been extended from 29 July 2022 to 31 December 2023. At the writing of this report, the Honduran Red Cross has reached the end of their intervention with the Emergency Appeal funds, while the other National Societies have extended their timeframes for implementation. They will continue to carry out actions until the end of the Emergency Appeal, at which point they will transition to their national migration programs.

## 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 migrants<sup>1</sup>, 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.

<sup>1</sup> 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.



Unlike in the 1990s, when most migrants were of Central American nationalities, and there was evidence of a growing south-north migration, today migrants come from multiple regions and continents. Many are from very different nationalities, and often use Panama as the first point of passage to continue to the United States and Mexico. The mixed flows trigger multiple groups and profiles of migrants travelling in Central America by different routes and at various stages of the journey in the same region. For example, migrants from Guatemala, Honduras, El Salvador, and Nicaragua, which are countries of both origin and return, are vulnerable since, among other things, they have often been displaced due to violence, poverty, lack of employment or other threats such as disasters.

Since the launch of the EA, migration flows through the Darién have increased significantly. By the end of 2022, more than 248,000 people had arrived in Panama through the Darién to continue their journey primarily to North American countries. **The Panamanian authorities have reported 333,704 arrivals by the end of August<sup>2</sup>, representing a 134% increase from the previous year's total and a 323% increase from the same period in 2022.**

Beyond the sharp increase in the number of people making the journey, the most significant trend during the period January-August 2023 has been the shift of migrants from Cuba and African nations, who are increasingly choosing air

<sup>2</sup> [National Migration Service, Panama, Statistics.](#)

routes to reach Central America, bypassing the Darien to continue their journeys north. Honduras, on the other hand, has witnessed a 553% increase in arrivals from African nations. Similarly, the presence of only 700 Cubans was reported in the Darien, in contrast to the 17,061 registered in Honduras.

The United States of America government has adopted new immigration policies that aim to reduce irregular migration, with the implementation of programs to get easier entry conditions through the program for Venezuelans in 2022 and the new program for people from Venezuela, Nicaragua, Cuba, and Haiti. The termination of Title 42 as of 11 May 11th<sup>3</sup>, the reinstatement of Title 8, the denial and expulsion of individuals who do not meet the asylum requirements, and the prohibition of subsequent entry for a specified duration. In addition, other measures have been taken through inter-governmental agreements to promote an orderly and safe migration (Colombia, Spain, Canada<sup>4</sup>, Costa Rica<sup>5</sup>). However, currently those measures have not shown a reduction in the flows in the region.

The scenario exercises propose, as the most probable scenario, an influx of **up to 750,000 individuals into Central America**. The primary factors underlying the vulnerabilities in the countries of origin, such as Venezuela and Haiti, as well as other scenarios such as violence, with the influx of **Ecuadorians surpassing 43,000 individuals** in eight months, compared to 29,000 in all of 2023. Additionally, the escalating number of **secondary movements (mainly Venezuelans) from South American** countries is primarily attributable to the complexities of integration in host countries, resulting from economic disparities and an increase in protection risks such as xenophobia. Potentially, crisis in progress in other regions may impact the flows in the coming months.

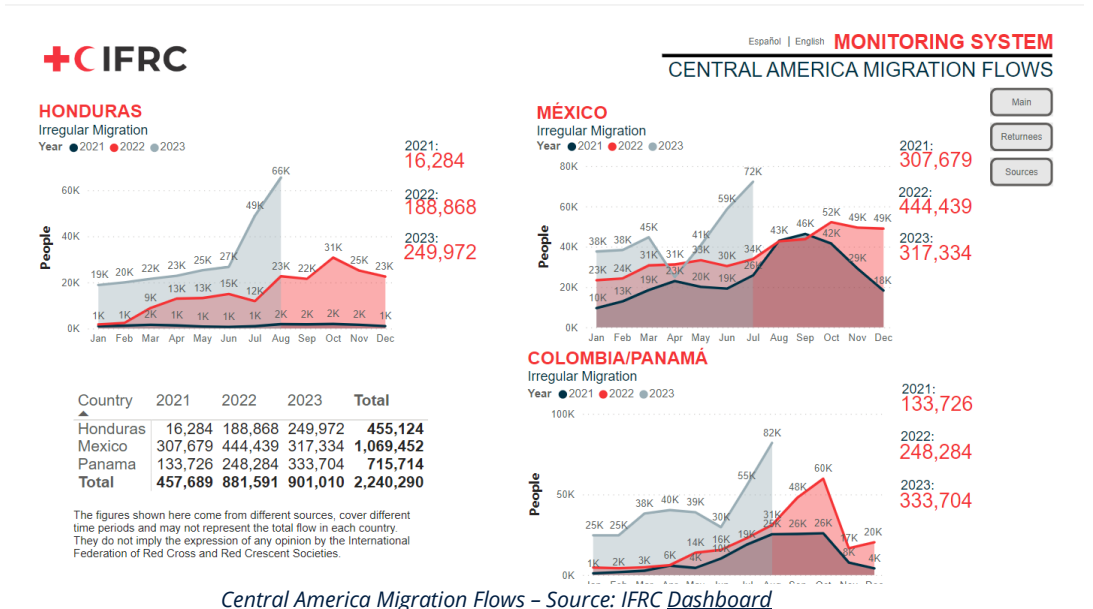
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In addition, private companies' decisions might have an impact in migratory flows as is the example of the operator of the largest railway network in Mexico -FERROMEX- which suspended the activity of 60 freight trains due to the flow of thousands of migrants who use these vehicles to reach the border with the United States<sup>6</sup>.

### Transition to chronic flows in Central America

Migration in the Darien region has been documented since 2016, particularly among individuals of the Caribbean, Asian, and African nationalities. This trend has been augmented by the influx of Venezuelans and emerging nationalities such as Ecuador and Colombia since the end of 2021, resulting in an escalating regional migration. There are also the regular situations of northern countries such as the so-called caravans and return flows.

Following the approach of the **Route-Based Global Program**, a transition is expected in the use of capacities and mobilization focused on localizing resources for response and strengthening regional coordination to provide



<sup>3</sup> <https://www.state.gov/u-s-government-announces-sweeping-new-actions-to-manage-regional-migration/>

<sup>4</sup> <https://www.dhs.gov/news/2023/05/03/trilateral-statement-joint-commitment-latin-america>

<sup>5</sup> <https://cr.usembassy.gov/united-states-and-costa-rica-sign-migration-arrangement/>

<sup>6</sup> [https://twitter.com/GMexico\\_Prensa/status/1704229114029183193](https://twitter.com/GMexico_Prensa/status/1704229114029183193)

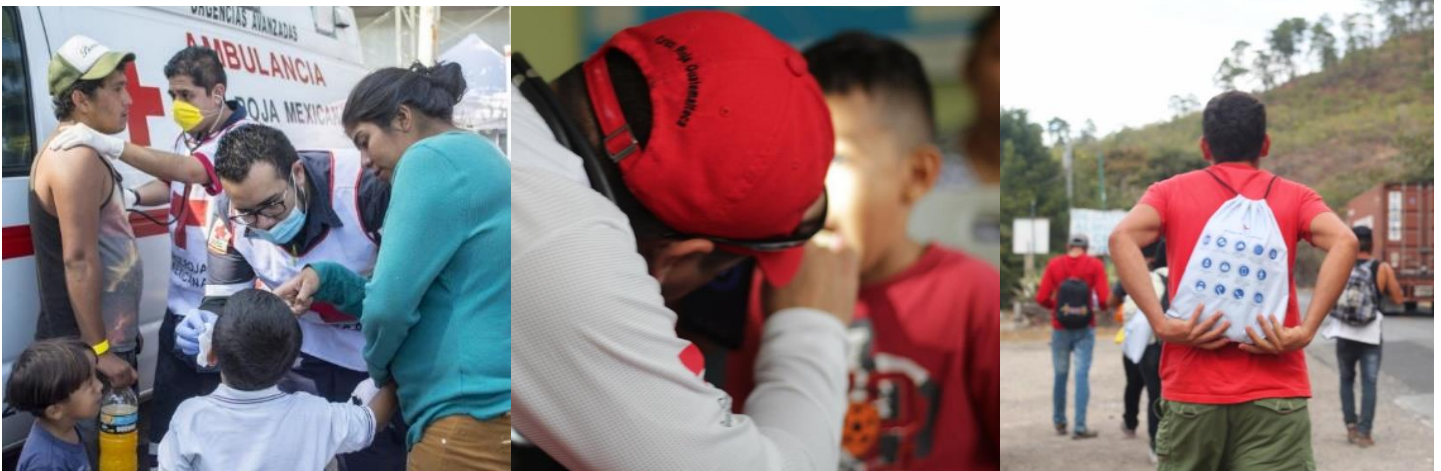
regional coherence, improve the information management, and National Society cross-border collaboration focuses on increasing the impact and long-term sustainability. Furthermore, the synergies with other ongoing initiatives in the region, such as ECHO's **Pilot Programmatic Alliance**, will be promoted within its Human Mobility pillar.

The focus of this transition will seek **scaling-up the response to people on the move in needs**, undertaking the proper actions to provide humanitarian assistance and protection support along the migratory routes through **Humanitarian Services Points as our big bet**.

- The key actions implemented during the primary response will be undertaken focus to increase in people in transit which will be progressive transferred to the current long-term programming. Enhancing the institutional capacities for preparedness effectively response on population movement in from long-term or chronic crisis.
- Improve information management for a better understanding of flows through a constant monitoring of context, needs assessment, and mechanism to promote secure information sharing between National Societies along the migratory routes in Central America and Mexico. It will also consider the linkage with other National Societies that are part of the route (Colombia, and Andean countries).
- Promote social inclusion and social cohesion with host communities to reduce the xenophobia and protection risk of migrants as well as to promote the integration (if possible) and the reintegration of returnees.
- Leverage the Humanitarian Diplomacy. Leading actions to influx the first responsible and policy changes for improving the access to humanitarian assistance and protection of people on the move on needs irrespectively their legal status.

## Summary of response

### Overview of the host National Society and ongoing response



*People assisted with pre-hospital care and hygiene kits. Source: NRCSM and NRCSG*

Throughout this appeal, the National Societies involved have carried out a series of strategic actions aimed at providing support and relief to migrants. The focus has been on providing essential humanitarian assistance, promoting the dignity of migrants, and collaborating 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) has focused on providing health services, Restoring Family Links (RFL), safe referrals in coordination with other organizations and authorities, production of drinking water, maternal

and childcare. Also, throughout the Appeal it has implemented mechanisms related to Community Engagement and Accountability (CEA). These actions have been carried out based on the most latent needs of the migrant population. In parallel, thanks to the financial and technical support of bilateral partners, the RCSP has managed to maintain and cover some of the main needs of the displaced population.

**Costa Rica:** The Costa Rican Red Cross (CRC) has focused its actions on providing first aid assistance, distributing hygiene kits, cleaning days, implementing actions related to Community Engagement and Accountability (CEA) with the migrant population and host communities, distributing food kits, as well as socializing key messages related to information on basic services during the migratory route, health, and personal hygiene, mainly.

**Honduras:** The Honduran Red Cross (HRC) has focused on coordinating the humanitarian response among the different humanitarian actors present in the southeastern border and another in the western zone to join efforts and complement the humanitarian response. It has also provided humanitarian assistance through support to temporary collective centres as well as the Centro de Atención al Migrante Irregular (CAMI), provision of containers for solid waste, conditioning of the water system, distribution of safe water, Restoring Family Links (RFL) services (including the distribution of self-care messages, connectivity services and the creation of safe spaces focused on children), pre-hospital care, and Mental Health and Psychosocial Support in Emergencies (SMAPS) and distribution of psychosocial support and biosafety kits.

**El Salvador:** The Salvadorean Red Cross Society (SRCS), has focused on providing humanitarian assistance through protection services through socialization of key self-care messages and safe referrals in coordination with other organizations and authorities, psychosocial care, durable solutions to migrants and/or displaced persons or victims of other situations of violence such as gender violence, domestic violence, sexual violence, and social violence due to abuse of power by state agents under the state of emergency. Likewise, the distribution of specialized hygiene kits, clothing, and psychosocial support. It has also provided specialized attention to migrant children through actions such as providing spaces for rest, food, hydration, medical attention, differentiated personal hygiene supplies and play materials.

At the same time, SRCS has also coordinated with other governmental and non-governmental institutions so that migrants can 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) has focused its intervention on pre-hospital care, distribution of safe water, psychosocial support, distribution of snacks, protection services, safe referrals in coordination with other organizations and authorities, delivery of differentiated hygiene kits, differentiated assistance for children, distribution of orientation maps, Restoring Family Links (RFL) services, services related to Community Engagement and Accountability (CEA), among others.

The interventions have been carried out directly with the migrant population, as well as with the host communities. It has also implemented actions related to institutional strengthening through training and/or updating of staff and volunteers on various topics to ensure quality humanitarian aid.

**México:** The Mexican Red Cross (MRC) has focused its intervention on pre-hospital care, distribution of differentiated hygiene kits, psychosocial support, distribution of safe 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, among others.

National Red Cross Societies have generated various tools and actions that have allowed them to provide humanitarian assistance and protection to migrants, as well as to guarantee their rights and dignity along the migratory route. Many of the aforementioned actions have been carried out through the Humanitarian Service Points (HSP), which are an emblematic 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 Societies, through various mechanisms for direct consultation with migrants, as well as meetings with host communities, partner organizations and key stakeholders, have identified the following needs:



*Volunteer from the Mexican Red Cross and staff from the Red Cross Society of Panama conduct interviews with migrants to identify immediate needs. Source: MRC – IFRC.*

**Panama:** The exponential increase in the flow of migrants poses several critical needs in key areas of humanitarian care:

**Health:** As the number of migrants increases, it becomes imperative to ensure the provision of adequate medical care. This involves ensuring a steady supply of essential medicines and supplies to address a wide range of health conditions. In addition, a significant increase in specialized personnel is required, including doctors, nurses and volunteers trained in first aid. At the same time, it is essential to have sufficient adequate spaces equipped to provide high quality medical care in response to the growing demand for services.

**Water, Sanitation and Hygiene (WASH):** To maintain adequate hygiene conditions in this challenging context, it is necessary to expand the water and sanitation infrastructure to meet the growing demand. This includes ensuring access to sufficient hygiene kits, expanding the number of showers and toilets available, and additional human resources, such as promoters and volunteers with WASH experience.

**Protection, Gender, and Inclusion (PGI):** Improving signage at the Temporary Migrant Shelters is critical to ensure effective orientation for all individuals. Hiring psychologists is essential to provide psychosocial support to both migrants and management staff and volunteers. Increasing safe referrals and providing adequate spaces for psychological assistance is crucial, as is training and mobilizing more volunteers to strengthen the dissemination of safe information. The expansion of Restoring Family Links (RFL) services also requires investments in equipment and human resources.

**Community Engagement and Accountability (CEA):** More surveys targeting migrants and other stakeholders are essential to understand and respond to specific and urgent needs. This involves acquiring more electronic devices to reach a greater number of people.

**Host Community Intervention:** Strengthening intervention with host communities is essential to expand assistance and provide comprehensive support in this challenging situation.

**Administrative and logistical:** Safe mobilization of staff and volunteers to the different points of care is critical, including having trained personnel for the mobilization of emergency vehicles. The management of safe spaces for the storage of humanitarian aid is another priority. In addition, security measures for both migrants, humanitarian personnel and volunteers must be reinforced.



*Staff of the Costa Rican Red Cross share information about temporary shelters for migrants in transit. Source: EFE.*

shelter to safeguard their safety and well-being. It is relevant to note that in recent months, Costa Rica has experienced a significant increase in the number of refugee applicants, to the point that the existing system is overwhelmed by the demand.

**Honduras:** Migrants have externalized various immediate needs, including the identification and confirmation of family members accompanying children and adolescents, as well as essential access to health services, nutrition, drinking water, sanitation and hygiene, food, clothing, temporary housing, comprehensive care for psycho-emotional trauma, protection, prevention and attention in cases related to gender violence, and access to communication and information messages, such as safe routes and available services, as well as preventive advice, for example, on the prevention of dengue fever, among others.

In addition, in recent months there has been a significant increase in the number of migrants with febrile illnesses such as dengue, infectious, gastrointestinal, and dermatological diseases. Therefore, it is necessary to strengthen the health services offered by the National Society and facilitate referrals to health centres or hospitals in cases where serious conditions requiring specialized medical attention are identified.

**El Salvador:** The Salvadorean Red Cross Society has identified various needs through direct consultations with migrants, as well as in meetings with partner organizations. These needs are:

**Costa Rica:** In the country, there are no authorized migrant stations or centres capable of accommodating a considerable flow of migrants entering through the southern border. This situation exposes many of these individuals to the loss of their belongings during the journey, disconnection from their families, and the risk of exploitation, stigmatization, and human trafficking. As a result, it is imperative to provide humanitarian assistance that addresses these immediate needs, as well as those that arise due to changing contexts.

Among the main needs externalized by migrants are the provision of economic assistance in the form of cash, basic and mediated information on the safe migration route, access to food, provision of safe drinking water, differentiated hygiene supplies and comprehensive protection. The latter involves the identification and safe referral of people in vulnerable situations, as well as the possibility of temporary



*Staff of the Honduran Red Cross shares self-care messages on the migratory route to migrant women. Source: IFRC.*

Migrants in transit: it is required to provide food, hydration, rest areas and lodging, as well as access to cash to continue their route. In addition, it is crucial to ensure access to medical services and medicines, as well as sexual and reproductive health services. The need for adequate clothing and footwear, as well as differentiated personal hygiene supplies, is highlighted. Also mentioned is the need for family reintegration services, areas with internet access and telephone connection, and immigration counselling according to everyone's legal situation. Additionally, the importance of providing psychosocial support focused on self-care to alleviate the emotional tensions resulting from the experiences lived during the Darien crossing has been pointed out.

Persons displaced by violence: Those who have faced gender-based violence, domestic violence, sexual or social violence due to the state of emergency in El Salvador have urgent needs for emergency shelter and short- and long-term psychological care to address trauma. In addition, specific food, hydration, clothing, footwear, and personal hygiene items need to be provided. Access to cash to cover various needs is essential, as is access to medical and sexual and reproductive health services, including the purchase of medicines. The need for legal assistance to seek justice in cases of rights violations is highlighted. Also mentioned are needs related to livelihood protection and training for employment. Decent housing and education are key issues.

Returned migrants: Returning migrants have similar needs, such as food, hydration, and access to cash. Livelihood strengthening, medical care, sexual and reproductive health services, psychological care, and hygiene supplies are also required. Training and certification are important to facilitate their reintegration into society.

People in the process of asylum, refugee, or international protection: They highlight the need for durable solutions, especially in terms of livelihoods while they await the end of their process.

**Guatemala:** The Guatemalan Red Cross has based its needs analysis on the trends observed in the behaviour of mixed migratory flows. This has been achieved through close monitoring by the teams on route, who report on the various situations, conditions and needs that migrants manifest along the route. This approach seeks to ensure a timely response to the basic needs identified.

Among the main needs reported are access to safe water, medical services, psychosocial care, Restoring Family Links (RFL) services, safe referrals, and the identification of unaccompanied migrant children, as well as transfers to hospitals in cases of serious health conditions, among others.

It is important to note that in recent months there has been an increase in the use of "unofficial" points of entry by migrants, which has generated an increase in needs and has changed the landscape. In this context, the GRC recognizes the importance of strengthening the coordination of the humanitarian response at the inter-agency level to continue providing support to various groups of people, with a special focus on those in vulnerable situations who are in transit and require prompt and adequate attention to their changing needs.

On the other hand, we emphasize the need to constantly monitor changes in migratory flows and the routes used. This is due to the growing demand for care en route, as a percentage of people in mobility cannot access the services available at the GRC due to the lack of a nearby HSP. The implementation of this measure would allow reevaluating strategies and redirecting humanitarian aid in an efficient manner.

**Mexico:** The Mexican Red Cross relies on various sources of information to tailor its humanitarian aid to the needs of migrants. One of these key sources is the UNHCR, which has been receiving consistent asylum requests. Of these requests, more than 50% have been related to specific protection needs. The main reasons leading to these asylum applications with protection needs include sensitive legal or physical situations, children at risk, severe medical conditions, single parents, women at risk, among other factors.

In addition, a survey conducted by UNHCR in Tapachula, Chiapas, revealed that migrants cited a variety of reasons for leaving their countries of origin. These reasons included lack of employment opportunities, intimidation, victimization by violence, insecurity, and difficulties in accessing food or medical services. They also indicated their needs, which included access to cash for various necessities, including continuing their migration route to the United States, shelter, legal assistance, food, and purified water, among others.



*Migrants waiting to be attended at one of the Humanitarian Service Points (HSP) of the National Red Cross Society of Mexico. Source: NRCSM*

MRC also conducted interviews with migrants in Tapachula, Chiapas, using the methodology of the Displacement Monitoring Matrix in Mexico. Most people cited rising market prices, security problems and lack of economic opportunities as the main reasons for their migration. They also mentioned that the choice of destination has been based on the possibility of providing a better education for their children, seeking a better life and job opportunities, as well as access to medical services.

In response to the changing context and increased flow of migrants in recent months, MRC has implemented new processes to identify and address needs. Surveys were conducted in cities such as Serdán, Celaya, Palenque and Huixtla, where the most requested services at the Humanitarian Service Points (HSP) were medical care, first aid, Restoring Family Links (RCF) services, food, and hydration.

Also, a diagnosis was carried out at the International and National Women's Shelter, Training and Empowerment House (CAFEMIN, by its acronym in Spanish) in Mexico City, where various needs were identified, such as lack of water supply and some cleaning supplies, high levels of stress among migrants and staff, overcrowding due to excessive occupancy, precarious sleeping conditions in some cases, and food limitations.

In addition, in terms of the **needs of volunteers** who have been actively participating in the implementation of National Society actions under this Emergency Appeal, a few key needs stand out. In the first place, to have access to continuous education and training opportunities in areas related to the sectors addressed in the Appeal, with emphasis on human mobility. The objective is to strengthen their knowledge and skills to ensure that they continue to provide relevant and quality information to the migrant population, host communities and migrant centres and/or shelters in each territory.

In addition, the need for mental health and psychosocial support services has been identified, including self-care sessions to help volunteers manage stress and tensions that may arise during the development of the actions, and in parallel, they can reflect on their well-being and adopt practices that promote their physical and mental health.

In terms of safety, it is essential that volunteers have the necessary personal protective equipment to protect their health and safety while providing humanitarian assistance. In addition, adequate life and accident insurance should be in place to provide an additional safety net in case of unforeseen incidents during the actions.

## **Operational risk assessment**

Considering the highly dynamic nature of the constantly moving migrant situation, it is essential to maintain an agile and continuous planning process that can respond to the changing needs of affected people and adjust as necessary. This planning is done on an ongoing basis, considering a variety of possible scenarios to ensure that National Societies are prepared to adapt their services and respond to affected populations in a relevant manner. This involves constant review and prioritization of the actions set out in the operational strategies within the framework of this Emergency Appeal.

Given the fluid nature of migratory flows and budgetary constraints, National Societies are constantly reviewing planned actions and prioritizing them according to the specific needs identified. Currently, all National Societies are focusing their efforts on addressing mainly the most immediate needs, which implies that some of the actions initially foreseen in their operational strategies have been affected and cannot be fully implemented.

Changes in regulations in transit and destination countries can lead to an accumulation of migrants at borders and reception points, which in turn generates discontent, insecurity, and insufficient provision of essential services. In this regard, National Societies work closely with other humanitarian organizations and national authorities to monitor and adapt to these ever-changing regulations. At the IFRC level, the regional teams responsible for migration and communications are alert to any changes and share them effectively with National Societies through the Central America Country Cluster Delegation to ensure a coordinated and efficient response.

## **B. OPERATIONAL ESTRATEGY**

### **Update on the strategy**

As part of the Mexico and Central American Migration Crisis Emergency Appeal, the Regional Operational Strategy aims to support the Red Cross Societies of Panama, Costa Rica, Honduras, El Salvador, Guatemala, and Mexico to scale up assistance and protection to 210,000 people along migratory routes. The Secretariat is supporting the country's operations with a Regional Operation structure and with Information Management and CEA expertise and has set up a regional monitoring and evaluation framework to enable a coordinated and enhanced 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) Surge capacity, k) Planning, Monitoring, Evaluation and Reporting (PMER), l) Finance and Administration, and m) Logistics.

This operation considers the long-term impact on National Societies with a holistic approach and looks beyond the term of the operational strategy to sustainability. It also links with current programmes 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.


To date, the initial Emergency Appeal strategy has a no-cost extension of 4 months (new end date 31 December 2023) to ensure implementation of actions from a recent contribution to of the National Societies of Panama, Guatemala, Honduras, and Mexico. Also, this time extension will be useful for those National Societies that may receive additional

donor support in the coming months through this Appeal, in view of the trend in recent months of increased migration flows throughout the region.

Faced with this situation, National Societies have carried out a review and prioritization of the actions contemplated in their operational strategies, considering the current context and the various possible scenarios related to the increase in migratory flows. This is to ensure that they can continue to provide relevant and high-quality humanitarian assistance to all migrant populations in need, while meeting their commitments to donors.

## C.DETAILED OPERATIONAL REPORT

### STRATEGIC SECTORS OF INTERVENTION<sup>7</sup>

 <b>Shelter, Housing and Settlements</b> People reached: 17,953				
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	4,516	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	5,465	10,000
	<i># of temporary collective accommodation supported directly by National Societies</i>	Costa Rica	-	2
		Honduras	7	3
		Guatemala	34	2
		Mexico	-	1
	Honduras	12	25	

<sup>7</sup> The figures presented in each sector correspond to 31 August 2023.

# of people trained on temporary collective accommodation issues

Guatemala

153

30

## Progress towards outcomes

The total number of persons reached in this sector includes persons who received direct relief assistance for basic needs and/or temporary collective accommodation service.

To date, the Red Cross National Societies of **El Salvador**, **Costa Rica**, and **Mexico** are not implementing actions in this sector since, following the revision of their operational strategies due to the constant change in migratory flows and the limited availability of funds, they have prioritized actions to cover the most urgent needs of the migrant population.



Staff of the Honduran Red Cross provides information on temporary shelter services for migrants. Source: IFRC

**Honduras:** The Honduran Red Cross (HRC) has distributed hydration and menstrual hygiene kits at the Centre for Attention to Irregular Migrants (CAMI) in the municipality of Danli. It has 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 have access to safe water.

The HRC has also strengthened the staff and volunteers active in the operation through training and refresher workshops on shelter issues to ensure relevant care.

**Guatemala:** The Guatemalan Red Cross (GRC) has directly supported temporary shelters through organizations that provide this service. The support has been mainly through the provision of necessities for people requiring the service. It has also directly supported institutions that provide temporary collective housing to people on the move, these vary by month, according to the needs that arise.

Likewise, the GRC has carried out training and updating processes for personnel and volunteers who directly support the attention to the migrant population on issues related to route orientation, psychosocial support, livelihoods, among other topics to strengthen the quality of the service provided.



## Livelihoods and Basic Needs

People reached: -

**Objective:** Affected people restore and strengthen their livelihoods

Indicator

NS

Actual

Target

<b>Key indicators:</b>	<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 entrepreneurs</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

To date, the National Societies of **El Salvador** and **Honduras** are not implementing actions in this sector since, following the revision of their operational strategies due to the constant change in migratory flows and the limited availability of funds, they have prioritized actions to cover the most urgent needs of the migrant population.

**Guatemala:** In February, the Guatemalan Red Cross gathered information to begin developing a feasibility study for the distribution of seed capital to entrepreneurs in a community in the department of Izabal. To date, the distribution of seed capital has not yet been carried out because the GRC has had to prioritize actions due to the increase in migratory flows and the extra needs that have arisen in the migrant population, as well as the lack of funds.



### Multi-purpose Cash

People reached: 45

<b>Objective:</b>	<i>The most vulnerable people have their needs met through the use of cash.</i>			
<b>Key indicators:</b>	<b>Indicator</b>	<b>NS</b>	<b>Actual</b>	<b>Target</b>
	<i># of people reached with cash and voucher assistance</i>	Panama	-	200
		Costa Rica	-	1,200
		El Salvador	45	625
		Honduras	-	4,500
	<i>Amount of cash distributed (in CHF)</i>	Panama	-	40,000
		Costa Rica	-	300,000
		El Salvador	11,250	11,250
		Honduras	-	150,000
	Panama	-	20	

# of volunteers and National Societies staff trained in livelihoods tools and Cash and Voucher Assistance (CVA)	Costa Rica	-	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

To date, the National Societies of **Panama** and **Honduras** are not implementing actions in this sector since, following the revision of their operational strategies due to the constant change in migratory flows and the limited availability of funds, they have prioritized actions to cover the most urgent needs of the migrant population.

**Costa Rica:** Initially, CRC conducted a feasibility study and market analysis for the distribution of cash assistance, which determined that the most practical modality was the delivery of multipurpose humanitarian aid cards. However, due to recent changes in needs and limited time available, CRC has conducted a new internal assessment and decided to change its approach. Instead of the cards, the distribution of supplies valued at the initial cost previously allocated for the cards (CHF 280.00) will be chosen, following the same selection criteria for the people to be assisted.

In addition, CRC has planned training and updating processes on Cash and Voucher Assistance (CVA) related issues for staff and volunteers who have been directly involved in the operation actions. This will ensure that everyone has the basic knowledge necessary to provide relevant guidance to the people assisted who will receive this specific assistance modality. Progress in these actions will be reflected in the final report.

**El Salvador:** The Salvadorean Red Cross during the initial phase of development of the feasibility study for the purpose of multipurpose cash distribution, identified that migrants in transit faced difficulties when trying to withdraw money. This was mostly because most people lacked a physical personal identification document, having only a digital one that was not accepted by banks. In addition, due to the state of emergency, there were numerous limitations to carry out cash distributions.

In view of these circumstances, the SRC carried out an internal assessment and made the decision to change the modality of delivering cash for cards redeemable for food, with a value of USD 250.00. These cards were initially distributed to migrants in transit, internally displaced persons, and victims of gender-based violence. During the distribution, satisfaction surveys were conducted, the results of which are currently being analyzed and will be reflected in the final report.



### Health & Care

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

People reached: 82,908

Objective:	<i>The most vulnerable people receive high quality health and care services, including MHPSS.</i>			
<b>Key indicators:</b>	<i>Medical Services</i>			
	Indicator	NS	Actual	Target
	<i># of people reached with targeted health services</i>	Panama	24,217	5,000
		Costa Rica	4,212	20,000
		Honduras	12,817	12,000
		Guatemala	31,531	27,700
		Mexico	547	750
	<i># of family first aid kits distributed</i>	Costa Rica	148	140
		Honduras	6,000	2,500
		Guatemala	-	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	85	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>			
<b>Indicator</b>	<b>NS</b>	<b>Actual</b>	<b>Target</b>
<i># of people reached with health promotion sensitization</i>	Panama	481	1,000
	Honduras	-	12,000
	Guatemala	20,204	27,700
	Mexico	919	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	24	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>			
<b>Indicator</b>	<b>NS</b>	<b>Actual</b>	<b>Target</b>
<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	12,234	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	1,300	1,200
	Guatemala	2,491	9,000
<i># National Societies staff and volunteers trained in MHPSS</i>	Honduras	35	60
	Guatemala	-	50

# of sessions of self-care for staff and volunteers.	Mexico	-	20
	Costa Rica	-	5
	El Salvador	6	10
	Honduras	5	6
	Mexico	2	3

### Progress towards outcomes

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

**Panama:** With the steady increase in the influx of migrants, the Red Cross Society of Panama has focused on providing basic first aid services, maternal and child health, as well as medical care in the Darién region, which encompasses the two Temporary Migration Reception Stations (ETRM) of San Vicente and Lajas Blancas. Medical care is provided on an ongoing basis and a few recurrent illnesses have been identified, including acute diarrheal diseases, lower extremity wounds, common colds, high blood pressure, diabetes mellitus, skin abscesses, acute tonsillitis, among others. With the arrival of the rainy season in recent months, there has been an increase in cases of skin lesions and diarrhea.



*Personnel of Red Cross Society of Panama providing medical attention to a migrant. Source: IFRC.*

In addition, cases of dehydration have been detected, and in collaboration with other partners, actions have been coordinated to distribute hydration kits, with a particular focus on the male population over 18 years of age, which is the most served in this category. It has been observed that, in the Lajas Blancas ETRM, people from the local community have also sought medical attention.

At the same time, Mental Health, and Psychosocial Support (MHPSS) in Emergencies services have also been provided to migrants in transit, as well as to people from the host communities who have requested them. Care has focused mainly on providing short, individualized sessions.

In addition, as part of the Red Cross Society of Panama strengthening and continuous improvement initiatives, it has been promoting training and updating sessions on first aid. These sessions are mainly aimed at volunteers who play a key role in direct assistance to migrants, to ensure effective and timely care. This training not only enhances medical care capacity, but also instils 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 has concentrated its efforts on providing first aid to migrants, both on the southern and northern borders of the country. The most frequent consultations include wounds, friction rashes, inflammation of the lower extremities, allergies, skin rashes, sunstroke, vomiting, diarrhea, and vital signs checks, among others. It is important to note that the National Society has not been able to carry out actions related to Mental Health and Psychosocial Support in Emergencies due to the lack of funds necessary to provide quality care.

**El Salvador:** The Salvadorean Red Cross has provided psychosocial care and accompaniment, psychosocial support days, self-care days and distribution of differentiated psychosocial support kits to children, adolescents,

and adults (made up of play materials for children and adolescents, and in the case of adults, it includes a manual of mental activities, among other inputs).

Individual and family care has also been 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, it has developed self-care workshops for the staff and volunteers of the SRC 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 has developed pre-hospital care and Mental Health and Psychosocial Support in Emergencies services at strategic points in Danlí, Trojes, Las Manos and Ocotepeque. Although the funds of the appeal were not sufficient to include the purchase of medicines and pre-hospital care supplies, through coordination with other projects, it has been possible to provide complete and quality care to the population that has required it. At the same time, campaigns have been developed to socialize key messages related to MHPSS individual and community health promotion with migrants, as well as with host communities.

In addition, self-care sessions have been held with staff and volunteers from the National Society 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 has 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 National Society has also carried out training/updating processes on various topics, including first aid, for people and volunteers working directly with the migrant population to continue guaranteeing the relevance and quality of the services provided. At the same time, host communities have been trained in first aid, and community first aid kits will be distributed to them, which will be reflected in the final report.



*Mobile Medical Unit in service in Nogales, Sonora. Source: MRC.*

**Mexico:** The Mexican Red Cross has provided medical care and first aid, as well as psychosocial support services. It has developed and printed an activity booklet "Emociones en ruta" (Emotions on the road) aimed at migrant children. The objective is to support the recognition of emotions and promote self-care and self-protection measures for children to prevent family separation.

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

Likewise, as part of the strengthening of the Humanitarian Assistance Points (HSP), two Mobile Medical Units were purchased 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 recent months, the National Society provided basic medical assistance and referrals to the Mexican Institute of Social Security 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: 125,889

**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			3,410	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	30,798	2,500
# of personal hygiene kits distributed		Panama	800-	1,500
		Costa Rica	6,905	15,000
		El Salvador	1,300	4,000
		Honduras	12,258	30,000
		Guatemala	3,342	34,000
# of litres of drinking water distributed through safe water supply		Panama	16,531,700	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 <sup>8</sup>	

### 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.

<sup>8</sup> # of campaigns.



RCSP staff checks and maintains water pumps for water distribution. Source: IFRC.

**Panama:** RCSP continues with the distribution of safe water to the migrant population at the Temporary Migrant Reception Station (ETRM) in Lajas Blancas, people in the Bajo Chiquito host community, as well to people who have been assisted directly at the Humanitarian Service Point (HSP) and people who have been assisted with specific health services at different points.

Likewise, personal hygiene kits containing mainly (toothbrush, toothpaste, shampoo, razor, soap, etc.) have been distributed. These actions have been 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.

**Costa Rica:** CRC has prioritized the distribution of differentiated hygiene kits to meet one of the basic needs of migrants. This distribution has been 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 these operations maintain constant communication to provide assistance to people who encounter difficulties in reaching the HSPs, and these service points are also mobilized as needed, either in the event of an increase or decrease in the migratory flow.

**El Salvador:** SRC has distributed differentiated hygiene kits to 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 have also been distributed. In addition, safe water has also been distributed in 600 ml plastic bottles.

**Honduras:** HRC has currently prioritized the distribution of differentiated hygiene kits, distribution of safe water in the conditioning of water systems in the collective centres. Material with key messages on hygiene promotion and menstrual hygiene has been printed, as well as vector control campaigns and fumigation days in the different accommodation centres.

**Guatemala:** GRC within the Humanitarian Service Points (HSP) has distributed hygiene articles, hygiene kits and water bottles. The National Society has ensured that distributions are given in quantities and materials that are easy to transport so that they are useful and can be used by all people.



## Protection, Gender, and Inclusion

People reached: 52,548

### Objective:

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

Indicator

NS

Actual

Target

<b>Key indicators:</b>	<i># of sectoral or PGI assessments conducted using the PGI Minimum Standards</i>	Panama	-	1
		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	29,975	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	206	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		4,962	1,050	
Mexico		-	500	
<i># of humanitarian diplomacy initiatives on prevention and response to SGBV and violence against children</i>	Honduras	2	1	
<b>Progress towards outcomes</b>				

Comprehensive services have been provided, so the total number of people reached in this sector includes people who have received Protection, Gender, and Inclusion services, including people who have been supported with RFL services.

**Panama:** RCSP has shared culturally sensible key messages through channels and mechanisms accessible to all people. It has also made safe referrals in coordination with other organizations and governmental institutions.

At the same time, in relation RFL actions electric generators have been reinforced to ensure that all points have easy access to electricity. Likewise, migrants have been supported with access to spaces for charging cellphone batteries or other items that require it, as well as access to Wi-Fi signal, and in particular cases, to search for people.

**Costa Rica:** CRC has a policy called "Policy for gender equality and equity", which is implemented in all the actions it develops. In this regard, the National Society has developed training and updating processes on issues related to the norms of Protection, Gender, and Inclusion to ensure that all personnel deployed in the operation have the minimum training to ensure relevant care to all persons who require it.

**El Salvador:** SRC shared key messages related to protection, gender and inclusion to people who have approached the Humanitarian Service Points (HSP). The National Society also developed a rapid assessment to identify strengths and weaknesses that need to be strengthened to ensure that all actions taken with the migrant population are relevant to their age, culture, sex, gender, etc.

**Honduras:** HRC has participated in the protection sub-groups and has also worked on strengthening safe spaces with special emphasis on children and developing training processes on Protection, Gender and Inclusion 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 the National Society on the issue.

**Guatemala:** GRC within the Humanitarian Service Points (HSP) has carried out actions related to Protection, Gender, and Inclusion (PGI), through informative talks and distribution of key messages, as well as ensuring that



*Child making use of one of the RFL services at one of the Mexican Red Cross Humanitarian Service Points (HSP). Source: MRC.*

all services are accessible to all people who require them. At the same time, it has also carried out training/updating processes for staff and volunteers on PGI-related issues. It has also carried out actions related to RFL. These actions will continue to be developed in the following months, which will be reflected in the final report.

**Mexico:** The National Society has provided RFL services through Humanitarian Service Points (HSPs). These services have been strengthened after hearing suggestions and recommendations directly from the people. It is expected that in the coming months the use of these services will be further promoted, which will be reflected in the final report.



## Community Engagement and Accountability

People reached: 4,744

**Objective:** *The diverse needs, priorities and preferences of affected people guide the response through a people-centred approach and meaningful community involvement.*

Key indicators:	Indicator	NS	Actual	Target
		# of National Societies with established feedback mechanisms	Panama	Yes
Costa Rica			Yes	Yes
Honduras			Yes	Yes
# of community consultation meetings		Costa Rica	3	3
		Guatemala	6	8
# of satisfaction surveys completed		Panama	2,317	300
		Costa Rica	19	4,000
		Honduras	125	4,000
		Guatemala	2,283	400
% of surveyed people reporting that they receive useful and actionable information through different trusted channels (broken down into digital and non-digital channels).		Panama	70%	60%
		Honduras	-	75%
		Guatemala	95%	75 %
% of affected people surveyed who report that humanitarian assistance is delivered in a safe, accessible, accountable, and participatory manner.		Panama	70%	60%
		Costa Rica	-	70%
		Honduras	-	75%
		Guatemala	95%	75 %
# 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, RCSP has conducted satisfaction surveys directed to a random sample of people who have used the services offered. To date, the results indicate most of the population surveyed perceives that they have received high quality services adequate to their needs. In addition, respondents have

expressed additional areas of interest in which they would like more information, including how to contact family members, access food and health services, primarily.

The implementation of these satisfaction surveys has allowed the National Society to identify areas that require strengthening, needs for service expansion, adjustments to key messages, and ultimately improve communication of its role as a humanitarian actor on the ground.

**Costa Rica:** A sensitization strategy has been implemented targeting the receiving communities, and awareness-raising talks have been held for staff and volunteers on topics related to CEA focus. Based on the information gathered in these sessions, "Pre-hospital care cards for migrants with chronic diseases and pregnant women" have been 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.

The migratory flow in recent months has generated diverse expectations and attitudes in the receiving population, so meetings with the communities have been key to be able to dialogue and resolve doubts. Likewise, all this information will be used to generate an awareness-raising strategy aimed at the receiving 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 has made it possible to think about



Guatemalan Red Cross volunteer conducts a satisfaction interview with migrants who have been assisted with humanitarian aid. Source: GRC.

replicating it for future distributions, beyond the Appeal, because in this way it will be possible to know first-hand the pros and cons of what is distributed.

**Guatemala:** The National Society continues to consult with the communities, as well as with the people to whom services are provided at the Humanitarian Service Points (HSP) to know their perceptions and suggestions to continue strengthening and ensuring the quality of care provided. These actions will continue to be developed in the following months to continue guaranteeing the relevance and quality of the services provided.



## Migration

People reached: 249,585 (148,488 directly and 101,097 indirectly)

<b>Objective:</b>	<i>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.</i>			
<b>Key indicators:</b>	<b>Indicator</b>	<b>NS</b>	<b>Actual</b>	<b>Target</b>
	# of HSPs created or reinforced	Panama	2	1

	Costa Rica	4	4
	El Salvador	0	4
	Honduras	10	2
	Guatemala	7	8
	Mexico	4	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	28,445	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	3,000	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	85,689	5,000
<i># of staff and volunteers trained in migration and displacement</i>	Costa Rica	50	100
	El Salvador	-	50
	Honduras	-	25
	Guatemala	132	50
	Mexico	-	20

### Progress towards outcomes

**Panama:** The Humanitarian Service Point (HSP) is located at the Temporary Migrant Reception Station (ETRM) in San Vicente, which reinforces the attention to migrants by concentrating assistance capabilities in one place.

Although this HSP has been very useful and has significantly supported the operations of the National Society, in recent months it has experienced mechanical failures that have sometimes rendered it unusable.

In view of this situation and recognizing the importance of the HSP, the National Society has undertaken various advocacy actions. Thanks to these efforts, in May 2023 a new HSP was acquired through funding from ECHO's Pilot Programmatic Partnership. This new HSP is providing services in the Lajas Blancas ETRM, which has contributed to the National Society continuing to strengthen its services in HSP, including those specific to this Emergency Appeal.

In addition, a technical pilot test of the Red Data initiative was initiated in Planes de Gualaca, Chiriquí with personnel responsible for monitoring and evaluation and technology of the National Society. To date, the technical elements that were evidenced during the test are being adapted and the official permit from the Panamanian Government to install the antenna is being awaited.

**Costa Rica:** Assistance has been provided to migrants with information support and two interpreters, one at each border, allowing better communication when providing assistance and confidence for them to approach and express their needs. They are also given information material on health issues and useful information during their journey.

**El Salvador:** The National Society has directly assisted people at the Humanitarian Service Points (HSP) through psychosocial care, safe referrals, legal and migratory attention. The rest of the attention has been provided indirectly through inputs provided (mainly through kits and safe water) to governmental entities and partner organizations, who also provide direct attention and distribution of humanitarian aid to the migrant population. Among the governmental entities and organizations are the Migrant Attention Management, part of the Migration and Alien Affairs Directorate; 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 are provided through the Humanitarian Service Points (HSP) in the municipalities of Danli, Trojes and Ocotepeque, these are attended by the technical team and trained volunteers of the National Society in the different thematic areas, mechanisms used by the Global Camp Coordination and Camp Management Cluster (CCCM), RFL, MHPSS, Health and WaHS.

**Guatemala:** The National Society has strengthened the Humanitarian Service Points (HSP) to ensure that they are dignified and safe spaces to receive attention to people who require the services provided. At the same time, safe connectivity services have been provided, as well as the distribution of protection messages so that they can be considered during their mobility. The National Society are also constantly training staff and volunteers to continue guaranteeing the quality of the services provided.

**Mexico:** As part of the strengthening of the Humanitarian Assistance Points (HSP), two Mobile Medical Units were purchased, which will be used as HSPs and have been delivered to the Tijuana, Baja California and Nogales, Sonora delegations to assist migrants. Each unit has two consultation rooms, a reception area, and a canopy to improve waiting conditions. In recent months, it was possible to provide basic medical assistance 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.



*Staff and volunteers of the National Society of the Red Cross of Honduras provide different services at the Humanitarian Service Points (HSP) to migrants. Source: IFRC*

In addition, stationery supplies were provided to the Humanitarian Assistance Points in Palenque, Chiapas; Ciudad Sedán, Puebla; Celaya, Guanajuato; and Tenosique, Tabasco. As well as the resupply of brochures with the map of Mexico, available services, and self-care messages. Strengthening the services provided in at least 6 HSPs.



## Risk Reduction, climate adaptation and Recovery

People reached: -

<b>Objective:</b> <i>Host communities in high-risk areas are prepared and able to respond to disasters</i>				
<b>Key indicators:</b>	<b>Indicator</b>	<b>NS</b>	<b>Actual</b>	<b>Target</b>
	<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

To date, the National Societies of **Guatemala** and **Costa Rica** have halted initial 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 have prioritized actions to cover the most urgent needs of the migrant population.



## Education

People reached: -

<b>Objective:</b> <i>Mitigate child protection risks through the provision of essential child-centred services.</i>				
<b>Key indicators:</b>	<b>Indicator</b>	<b>NS</b>	<b>Actual</b>	<b>Target</b>
	<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

To date, the National Societies of **Costa Rica** and **El Salvador** have not continued with the initial 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 have prioritized actions to cover the most urgent needs of the migrant population.



## Environmental sustainability

People reached: -

**Objective:** *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.*

Key indicators:	Indicator	NS	Actual	Target
	# of green activities developed of environmental sustainability	Costa Rica	8	10

### Progress towards outcomes

**Costa Rica:** During the transit of the migrant population along the migratory route in both borders, a significant amount of waste is generated daily, which poses a problem in the localities due to the exponential accumulation of waste in the bus terminals. This has led to the organization of various campaigns to collect waste and promote environmental sustainability. These campaigns have had the active participation of volunteers from various auxiliary boards.

At the border post of Paso Canoas, the National Society coordinated with several regional sections, including Golfito, Ciudad Neily and Coto Brus, as well as with 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 center.

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. Together, these campaigns resulted in the collection of more than 260 bags of waste at both borders.

At present, the National Society has paused these activities in response to the recent surge in migratory flows and the heightened demand for actions to meet the needs of the migrant population and has had to prioritize in order to respond in a focused manner.

## Enabling approaches



## National Society Strengthening

**Objective:** *National Societies respond effectively to the broad spectrum of evolving crises and their auxiliary role in disaster risk management is well defined and recognized.*

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	
	Guatemala		40	25	
	Mexico		50	100	
	<i>NS capacities strengthened to provide services to the affected population (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**

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

At the same time, various trainings and updating processes have been carried out on topics related to the sectors prioritized by each National Society within the framework of the Appeal.

In addition, National Societies have ensured that all volunteers have medical and accident insurance. This measure is implemented as an important precaution against any eventuality that may occur during the execution of humanitarian actions. In parallel, several initiatives have also been promoted for self-care and psychosocial care, both at individual and group level. The main objective of these initiatives is to balance the mental and physical health of the volunteers, thus contributing to their overall wellbeing.

During June 2023, the IFRC Regional Office for the Americas, with the support of the Reference Centre on Institutional Disaster Preparedness (CREPD by their acronyms in Spanish), undertook a process of updating the sexual and gender-based violence (SGBV) curriculum 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 funds from this workshop came from this Emergency Appeal. The results will be useful for the National Societies of this Appeal to have more inputs to strengthen their actions related to SGBV and sexual violence.

Also, 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. An introduction was also given on issues related to safe referrals and gender-based violence. The workshop was carried out by the IFRC Regional Office for the Americas and the Central America Cluster through funds from this Appeal and in addition to the workshop, it was possible to have a look based on the route for the care and protection of migrants in transit which helps to have more evidence to be used by National Societies to strengthen their interventions.

Likewise, at the end of the Appeal, each National Society will develop a lesson learned workshop to make a synthesis assessment on basic evaluation criteria in relation to the actions developed in the Appeal. This exercise will provide evidence to contribute to the strengthening of the next operations, participating in planning with evidence.

Due to the time extension of the Appeal, each National Society will finish at different times, according to the planning of their actions, as well as the availability of funds. At the moment, only the National Society of Honduras has completed its actions and has already held its lessons learned workshop.



### Coordination and Partnerships

<b>Objective:</b>	<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>			
<b>Key indicators:</b>	<b>Indicator</b>	<b>NS</b>	<b>Actual</b>	<b>Target</b>
	<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

	<i>Movement coordination meetings organized, and updates are provided to the Movement partners (Yes/No)</i>	Guatemala	Yes	Yes
		Mexico	Yes	Yes
		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

All the National Societies that are part of this Appeal, together with the IFRC, developed during the months of October - December 2022 an assessment of the needs of the migrant population in the borders with Mexico and Central America, with the general objective of evaluating the humanitarian needs, information, and access to basic services of the migrant population in the key borders of Central America, with special attention to shelter, health (including mental health), water, hygiene and sanitation, food security and protection; and thus, have information that will help National Societies to strengthen their intervention strategies.

Also, during the development of the Appeal, the National Societies have maintained constant communication with the IFRC and 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.

The National Societies have also had direct communication with different governmental entities, local, national, regional, and international organizations to carry out context analysis, plan joint actions, to join efforts and be able to reach more migrants, with the purpose of providing quality humanitarian assistance. All these actions will continue to be developed to continue responding effectively.



**Secretariat  
Services**

Objective:	<i>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.</i>			
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

555 media articles have been published on the migratory crisis in Central America and Mexico between August 1, 2022, and September 30, 2023. This is equivalent to investing \$36.32 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. 68 posts have been published on the [@MKeaysIFRC](#) and [@IFRC\\_ES](#) Twitter accounts, and [@IFRC\\_ES](#) on Instagram. On Twitter, where the IFRC focused its content, and had an average of 1,765 [impressions](#) and an average of 85 [engagements](#) per post. [Videos from the field](#), and [testimonials](#) have the highest views, engagement, and impression rates. More information on social media activity is [available here](#)

Three content gathering missions have occurred to support the Migration Appeal: one to Honduras in July 2023, with [a web article](#) already published, as well as social media posts; one to Mexico in September 2023 with content to be published soon; and one to Darien in Panama, in the framework of the Programmatic Partnership project, but content has been repurposed for the migration appeal communications activities.

Currently there are no surge personnel deployed in the countries where the Appeal is being developed. Coordination and follow-up with National Societies is being done through the staff of the Central America Cluster.

## D. FUNDING

As of 2 September, 13 per cent of the Appeal's funding requirements has been covered. The IFRC kindly encourages increased donor support for this Emergency Appeal to enable host National Societies to continue to provide support to the migrants and host communities, primarily in the process of attending their immediate needs for food, shelter, water, and livelihoods.

Click [here](#) for the donor response.

### Federation-wide funding requirement\*

<b>Federation Wide Funding Requirement including the National Society domestic target, IFRC Secretariat and the Partner National Society funding requirement</b>	<b>IFRC Secretarian Funding Requirement in support of the Federation Wide funding ask</b>
<b>28 million CHF</b>	<b>18 million CHF</b>

*\*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 requirement



## OPERATING STRATEGY

### MDR43008 – Mexico & Central America: Migration crisis

#### FUNDING REQUIREMENTS

<b>Planned Operations</b>		<b>12,119,346</b>
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
<b>Enabling Approaches</b>		<b>4,782,061</b>
Coordination and Partnerships		2,381,340
Secretariat Services		29,829
National Society Strengthening		2,370,892
<b>TOTAL FUNDING REQUIREMENTS</b>		<b>18,000,000</b>

*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 Solis, [elias.solis@cuzroja.org.pa](mailto:elias.solis@cuzroja.org.pa)
- **General Director:** Larissa Rodriguez, [larissa.rodriguez@cuzroja.org.pa](mailto:larissa.rodriguez@cuzroja.org.pa)

### At the Costa Rican Red Cross

- **President:** Dyanne Marenco Gonzalez; [dyanne.marenco@cuzroja.or.cr](mailto:dyanne.marenco@cuzroja.or.cr)
- **General Director:** Walter Fallas; [walter.fallas@cuzroja.or.cr](mailto:walter.fallas@cuzroja.or.cr)

### At the Salvadoran Red Cross

- **President:** Dr. Benjamin Ruiz Rodas; [jose.ruiz@cuzrojasal.org.sv](mailto:jose.ruiz@cuzrojasal.org.sv)
- **General Director:** Rigoberto Hernandez; [rigoberto.hernandez@cuzrojasal.org.sv](mailto:rigoberto.hernandez@cuzrojasal.org.sv)

### At the Honduran Red Cross

- **President:** Juan Jose Castro; [josejuan.castro@cuzroja.org.hn](mailto:josejuan.castro@cuzroja.org.hn)
- **General Director:** Alexei Castro; [alexei.castro@cuzroja.org.hn](mailto:alexei.castro@cuzroja.org.hn)

### At the Guatemalan Red Cross

- **President:** Annabella Folgar; [annabella.folgar@cuzroja.gt](mailto:annabella.folgar@cuzroja.gt)
- **General Director:** Daniel Javiel; [daniel.javiel@cuzroja.gt](mailto:daniel.javiel@cuzroja.gt)

### At the Mexican Red Cross

- **President:** Fernando Suinaga; [presidencia@cuzrojamexicana.org.mx](mailto:presidencia@cuzrojamexicana.org.mx)
- **General Director:** Jose Antonio Monroy; [jamonroy@cuzrojamexicana.org.mx](mailto:jamonroy@cuzrojamexicana.org.mx)

### At the IFRC Americas Regional Office

- **Head of Central America Country Cluster Delegation:** Nelson Aly Rodríguez; [nelson.alyrodriguez@ifrc.org](mailto:nelson.alyrodriguez@ifrc.org)
- **Head of Health, Disasters Climate and Crises:** Marianna Kuttothara, [marianna.kuttothara@ifrc.org](mailto:marianna.kuttothara@ifrc.org)
- **Operations, Evolving Crises and Disasters Manager:** Maria Martha Tuna; [maria.tuna@ifrc.org](mailto:maria.tuna@ifrc.org)
- **Head of Strategic Partnerships and Resource Mobilisation:** Monica Portillo; [monica.portillo@ifrc.org](mailto:monica.portillo@ifrc.org)
- **Communications Manager:** Susana Arroyo, [susana.arroyo@ifrc.org](mailto:susana.arroyo@ifrc.org)
- **Head of PMER and Quality Assurance:** Golda Ibarra; [golda.ibarra@ifrc.org](mailto:golda.ibarra@ifrc.org)
- **Logistics Coordinator:** Stephany Murillo, [stephany.murillo@ifrc.org](mailto:stephany.murillo@ifrc.org)

### In the IFRC Geneva Headquarters

- **DREF Senior Officer:** Eszter Matyeka; email: [eszter.matyeka@ifrc.org](mailto:eszter.matyeka@ifrc.org)
- **Operations Coordination Focal Point:** Karla Morizzo (acting); email: [karla.morizzo@ifrc.org](mailto: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

## OPERATION UPDATE FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	22/09-2023/8	Operation	MDR43008
Budget Timeframe	22/07-2023/12	Budget	APPROVED

Prepared on 29 Sep 2023

All figures are in Swiss Francs (CHF)

### MDR43008 - Central America & Mexico - Migration Crisis

Operating Timeframe: 29 Jul 2022 to 31 Dec 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
<b>Total Funding Requirements</b>	<b>18,000,000</b>
<b>Donor Response* as per 29 Sep 2023</b>	<b>1,344,774</b>
<b>Appeal Coverage</b>	<b>7.47%</b>

## II. IFRC Operating Budget Implementation

Thematic Area Code	Budget	Expenditure	Variance
AOF1 - Disaster risk reduction	12,060	5,307	6,753
AOF2 - Shelter	43,798	34,382	9,416
AOF3 - Livelihoods and basic needs	58,506	14,039	44,467
AOF4 - Health	372,503	427,165	-54,662
AOF5 - Water, sanitation and hygiene	374,627	314,286	60,341
AOF6 - Protection, Gender & Inclusion	245,958	264,869	-18,911
AOF7 - Migration	577,053	492,753	84,300
SFI1 - Strengthen National Societies	310,043	218,862	91,181
SFI2 - Effective international disaster management	84,255	35,559	48,696
SFI3 - Influence others as leading strategic partners	0	0	0
SFI4 - Ensure a strong IFRC	194,860	209,693	-14,834
<b>Grand Total</b>	<b>2,273,663</b>	<b>2,016,915</b>	<b>256,747</b>

## III. Operating Movement & Closing Balance per 2023/08

Opening Balance	1,034,933
Income (includes outstanding DREF Loan per IV.)	1,189,209
Expenditure	-2,016,915
<b>Closing Balance</b>	<b>207,227</b>
Deferred Income	67,086
Funds Available	274,313

## IV. DREF Loan

* not included in Donor Response	Loan :	1,060,229	Reimbursed :	50,000	<b>Outstanding :</b>	<b>1,010,229</b>
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# Emergency Appeal

## OPERATION UPDATE FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	22/09-2023/8	Operation	MDR43008
Budget Timeframe	22/07-2023/12	Budget	APPROVED

Prepared on 29 Sep 2023

All figures are in Swiss Francs (CHF)

### MDR43008 - Central America & Mexico - Migration Crisis

Operating Timeframe: 29 Jul 2022 to 31 Dec 2023; appeal launch date: 29 Jul 2022

#### V. Contributions by Donor and Other Income

Opening Balance							1,034,933
Income Type	Cash	InKind Goods	InKind Personnel	Other Income	TOTAL	Deferred Income	
British Red Cross	198,435				198,435		
DREF Response Pillar				-50,000	-50,000		
Japanese Red Cross Society	-1,291				-1,291		
On Line donations	391				391		
Red Cross of Monaco	19,770				19,770		
Simón Bolívar Foundation/CITGO	159,383				159,383	67,008	
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	97,723				97,723	77	
<b>Total Contributions and Other Income</b>	<b>1,239,209</b>	<b>0</b>	<b>0</b>	<b>-50,000</b>	<b>1,189,209</b>	<b>67,086</b>	
<b>Total Income and Deferred Income</b>					<b>2,224,142</b>	<b>67,086</b>	